

# Partnering with Jails to Improve Reentry

*A Guidebook for  
Community-Based Organizations*

**AUGUST 2010**

JOHN JAY COLLEGE OF CRIMINAL JUSTICE

Anna Crayton

Liz Ressler

Debbie A. Mukamal

THE URBAN INSTITUTE

Jesse Jannetta

ALTERNATIVE SOLUTIONS ASSOCIATES

Kevin Warwick

# Partnering with Jails to Improve Reentry

*A Guidebook for  
Community-Based Organizations*

**AUGUST 2010**

JOHN JAY COLLEGE OF CRIMINAL JUSTICE

Anna Crayton

Liz Ressler

Debbie A. Mukamal

THE URBAN INSTITUTE

Jesse Jannetta



ALTERNATIVE SOLUTIONS ASSOCIATES

Kevin Warwick

This report was prepared under grant 2005-RE-CX-K148, awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, and the Office for Victims of Crime. Points of view or opinions in this document are those of the authors and do not necessarily represent the official position or policies of the U.S. Department of Justice.

The Urban Institute is a nonprofit, nonpartisan policy research and educational organization that examines the social, economic, and governance problems facing the nation. The views expressed are those of the authors and should not be attributed to the Urban Institute, its trustees, or its funders.



# Contents

About the Authors	v
Acknowledgments	vii
Introduction	1
1 Understanding the Big Picture: Incarceration and Jail Reentry Jails in the Context of the Criminal Justice System	3
2 Developing and Sustaining a Partnership with the Local Jail What's in It for You	9
Steps for Building an Effective Partnership	9
Working Together to Improve Client Outcomes	16
3 Working with the Jail Population and in the Jail Environment	21
Challenges Facing Jail Populations	21
Challenges to Providing Services in a Jail	23
Understanding Jail Culture	24
4 Examples of Strong Partnerships between CBOs and Jails	27
Rikers Island Discharge Enhancement	27
Hampden County Public Health Model for Corrections	27
Resolve to Stop the Violence Project	28
Montgomery County Department of Corrections and Rehabilitation: Pre-Release and Reentry Services	29
Boston Reentry Initiative	29
5 Resources for the Field	31
Organizations and Initiatives Focusing on Reentry	31
Reports and Publications on Reentry	33
Conclusion	35
Appendix 1: Sample Documents	37
Memorandum of Understanding: Sullivan County, NH	38
Memorandum of Understanding: Santa Barbara, CA	39
Release of Information: Douglas County, KS, Jail	45
Release of Information: Bert Nash Community Mental Health Center, Douglas County, KS	47
Appendix 2: Partnership Profiles	51
References	57





## About the Authors

**Anna Crayton** is the deputy director of research with the Prisoner Reentry Institute at John Jay College of Criminal Justice. Ms. Crayton has worked on a number of projects pertaining to sentencing, corrections, and reentry, including the development of a national resource guide to assist individuals in planning for their education upon release from prison and a quantitative analysis of the effects of long-term incarceration on reentry. Additionally, she is a doctoral student in criminal justice at the City University of New York Graduate Center.

**Liz Ressler** is a research assistant at the Prisoner Reentry Institute at John Jay College of Criminal Justice. Ms. Ressler has worked on a variety of projects related to prisoner reentry and juvenile justice. Prior to joining the Prisoner Reentry Institute, she worked as a resident supervisor for the Pre-Release Center at Montgomery County Department of Corrections and Rehabilitation. Ms. Ressler is currently pursuing a master's degree in social work from New York University.

**Debbie A. Mukamal** is the founding director of the Prisoner Reentry Institute at John Jay College of Criminal Justice. She is responsible for overseeing all of the Institute's projects, including the design and implementation of an innovative neighborhood-based reentry service initiative and the development of research and effective tools in the areas of entrepreneurship, correctional education, long-term incarceration, and reentry from local jails. Before joining John Jay College, Ms. Mukamal served as the found-

ing director of the National H.I.R.E. Network and a staff attorney at the Legal Action Center, where her work focused on the collateral consequences of criminal records. Ms. Mukamal holds a Juris Doctorate from New York University School of Law.

**Jesse Jannetta** is a research associate in the Urban Institute's Justice Policy Center. He directs projects relating to community supervision and reentry from both prison and jail. Before coming to the Urban Institute, Mr. Jannetta was a research specialist at the Center for Evidence-Based Corrections at the University of California, Irvine, where his work included projects on GPS monitoring of sex offender parolees, policies on parole discharge and violation response, and assessment of the California Department of Corrections and Rehabilitation's programs according to the principles of evidence-based design. He holds a master's degree in public policy from the John F. Kennedy School of Government at Harvard University.

**Kevin Warwick** is the president of Alternative Solutions Associates, Inc., and assists jurisdictions around the country with the development of jail overcrowding, mental health, and jail reentry programs. As assistant superintendent of community corrections at the Hampden County (Massachusetts) Sheriff's Office, Mr. Warwick designed and directed the first day reporting center in the country. He has published numerous articles on community corrections, jail treatment, and reentry programs. Mr. Warwick has a master's degree in social work from the University of Connecticut.





## Acknowledgments

The authors wish to thank Amy Solomon, senior research associate at the Urban Institute, and Jeff Mellow, associate professor at John Jay College of Criminal Justice, City University of New York, for their invaluable input and assistance in developing this guidebook.

We also wish to thank the many individuals whose efforts contributed significantly to the content of this guidebook. They include True-See Allah, Boston Reentry Initiative (Massachusetts); Mary Jo Braaten, Spokane Housing Authority (Washington); Nick Casamassimo, Drug Abuse Foundation of Palm Beach County (Florida); Mike Colbert, Hampden County Sheriff's Department (Massachusetts); Denise Darby-Haynes, DCCCA (Kansas); Christopher Dawley, Norfolk County Sheriff's Department (Massachusetts); Captain Randy Demory, Kent County Sheriff's Office (Michigan); Suellen Griffin, West Central Behavioral Health (New Hampshire); Loring Henderson, Lawrence Community Shelter (Kansas); Patrick Hughes, Bergen County Sheriff's Department (New Jersey); Ken Hunt, BEST Reintegration Program (Hawaii); Barbara Huppee, Lawrence-Douglas County Housing Authority (Kansas); Stephen Kaplan, San Mateo County Behavioral Health and Recovery Services (California); Nadine Kerstetter, Denver Works (Colorado); Captain Phazaria Koonce, Denver Sheriff Department (Colorado); Carol Lease, Empowerment Program (Colorado); Lieutenant Mark

Mahurin, Santa Barbara County Sheriff's Department (California); Richard McCarthy, Hampden County Sheriff's Department (Massachusetts); Tina Michaels, Montgomery County Department of Corrections and Rehabilitation (Maryland); Innael Miranda, Community Reentry Project (Colorado); Lorraine Montalto, Criminal Justice Partners for Community, Corporation for Justice Management (Massachusetts); Tom Mugavin, Prodigal Ministries, Inc. (Kentucky); Paul Mulloy, Davidson County Sheriff's Office (Tennessee); Shannon Murphy, Douglas County Sheriff's Office (Kansas); Rick Neimiller, American Jail Association; Hillel Raskas, Montgomery County Department of Corrections and Rehabilitation (Maryland); Jacqueline Robarge, Power Inside (Maryland); Fred Smith, St. Francis House (Massachusetts); Gwyn Smith-Ingley, American Jail Association; Jen Sordi, Hampden County Sheriff's Department (Massachusetts); Faye Taxman, George Mason University (Virginia); and Sharon Zehr, Bert Nash Community Mental Health Center (Kansas).

We would like to offer a special thank you to Mae, Michael, Thomas, Lamisha, and Chrissy for contributing their personal experience to this guidebook. Finally, we thank our funder, the U.S. Department of Justice, Office of Justice Programs' Bureau of Justice Assistance. Its leadership in the area of jail reentry is moving the field forward by providing guidance and support to jurisdictions across the country.







# Introduction

**AS A COMMUNITY-BASED ORGANIZATION (CBO)**, you see individuals and communities every day struggling with such issues as addiction, homelessness, mental illness, criminal involvement, and unemployment. Through your work, you are also likely to come into contact with individuals who have been held in one of the more than 3,000 local jail facilities across the country. If you have experience with that population, then you probably know that partnering with your local jail is an opportunity to make positive changes in the lives of those individuals who walk through your respective front doors. If you do not know the extent to which the population you serve overlaps with the jail population, exploring a partnership with the jail is a chance to find out and potentially to enhance your work based on what you learn. The number of men and women who return from jails to communities, a process known as jail reentry, is astounding—9 million each year. In effect, jails and CBOs have 9 million opportunities to collaborate to improve services and outcomes for the individuals, families, and communities most affected by incarceration.

Your organization can build on the indispensable work you are already doing and play three important roles in the jail reentry process:

- First, you can provide services to incarcerated clients who do not currently receive services in the jail.
- Second, your organization may work with individuals who have returned from jail to the community.
- The third and most valuable role involves combining the first two points and working with

people both before and after release. Continuity of care is integral to successful reentry.

The progress individuals make through programs in the jail—where they exist—can be lost after release unless these individuals are connected to services in the community. By continuing services in the community, individuals build on and further develop skills acquired in programs during incarceration, reducing the likelihood that they will return to jail. CBOs are vital partners in jail reentry initiatives because they can provide services both inside the jail and in the community; they are the connection to community services for individuals in jail.

Many challenges are associated with jail reentry. Men and women returning from jail are often undereducated, have few employable skills, and frequently suffer from addiction and other physical or mental health concerns. Unfortunately, very few receive adequate services to address these needs during their time in jail. A small number of disadvantaged neighborhoods often absorb the great majority of individuals returning from jail, stressing already overburdened community resources. Reentry efforts respond to these challenges by helping individuals access services designed to help them change their behavior, address their needs, and avoid another incarceration.

This guidebook has been developed to provide community-based organizations with an overview of jail reentry work and to help them develop and sustain a partnership with their local jail. The intended audience is CBOs, whether large or small, that are considering such a partnership. A wide variety of organizations have the skills, resources, and motivation needed to address the challenges of jail reentry,

including substance abuse treatment providers, homeless shelters, workforce development centers, neighborhood clinics, community colleges, and many others. Through building collaborative relationships and developing an increased sensitivity to and focus on issues of jail reentry, CBOs can join with jails to tackle the challenges of reentry.

The guidebook begins with a brief overview of the criminal justice system, with a focus on jails in the United States. It discusses how to build a partnership with the local jail and includes concrete steps to develop and sustain this partnership. Next, it discusses common challenges confronted by the jail population, as well as issues you might face working

in and with a jail. The fourth section provides examples of strong partnerships between CBOs and jails that serve as models. At the end of the guidebook, a list of reentry resources and examples of useful documents, such as memoranda of understanding, are presented.

Throughout this guidebook are profiles of individuals who have successfully transitioned from jail to the community with the help of a partnership between a CBO and a local jail.<sup>1</sup> These individuals' experiences are testimonies to the importance and benefits of partnerships between local correctional agencies and CBOs in addressing the needs of people affected by incarceration.

**Client profile: Maintaining connections in the community**

**Name:** Mae

**Length of stay in jail:** 4 days

**Program name:** Lawrence Community Shelter (LCS)—Lawrence County, Kansas

**How I learned about it:** I found out about LCS through my case manager at the jail along with word of mouth from friends.

**Services currently receiving:** LCS provides me with shelter during the evenings along with food and showers. The caseworkers at LCS were also able to help me receive services from the Kansas Department of Social and Rehabilitation Services (SRS). At SRS I have been able to access many services, such as the Food Stamp program.

**The most important thing I learned:** This experience has taught me that it is important to maintain my connections to the community. This helps me to stay focused and not lose sight of my goals.

---

<sup>1</sup>The individuals profiled in this guidebook were identified with the assistance of staff working with the partnerships listed in appendix 2. The staff nominated clients who had been successful, and consenting clients completed a questionnaire on their reentry experiences and contact with the jail/CBO partnership. The questionnaire responses were the basis of the client profiles.

# 1

## Understanding the Big Picture: Incarceration and Jail Reentry

**YOUR ORGANIZATION'S ROLE IN IMPROVING** the chances of success for individuals returning home from jail contributes to a larger national effort to address the issues of incarceration and reentry. This section is designed to provide readers with a broad understanding of where jails fit within the criminal justice system.

The United States incarcerates more people than any other country. Since the 1970s, the incarcerated population has grown tremendously. In the early 1970s, just over 330,000 people were incarcerated in a state or federal prison or in a local jail. Today, the incarcerated population is over 2.4 million. The average daily jail population has nearly doubled over the past two decades, from 408,075 to 776,573 (see figure 1.1) (Beck and Karberg 2001; Minton and Sabol 2009).

Due to constant turnover in the jail population, however, the average daily population greatly understates the degree to which jails contribute to the volume of those incarcerated in the United States. Jail populations turn over at a rate of 66.5 percent per week (Minton and Sabol 2009),<sup>2</sup> and there are an estimated 13.5 million jail admissions annually. Both the fiscal costs and the public safety issues associated with growth in the incarcerated population are great:

- In 2003, local governments spent over \$18 billion on corrections (institutional and community) (Hughes 2006).

<sup>2</sup> The Bureau of Justice Statistics calculates the weekly turnover rate by adding jail admissions and releases, dividing by the average daily population, and multiplying by 100.

- Over the course of one year, an estimated 9 million individuals will cycle in and out of local jails (Beck 2006).
- More than 80 percent of individuals are in jail for less than one month (Beck 2006).
- The offense profile of jail inmates is evenly distributed among property (24 percent), violent (25 percent), drug (25 percent), and public order (25 percent) offenses (James 2004).

### Jails in the Context of the Criminal Justice System

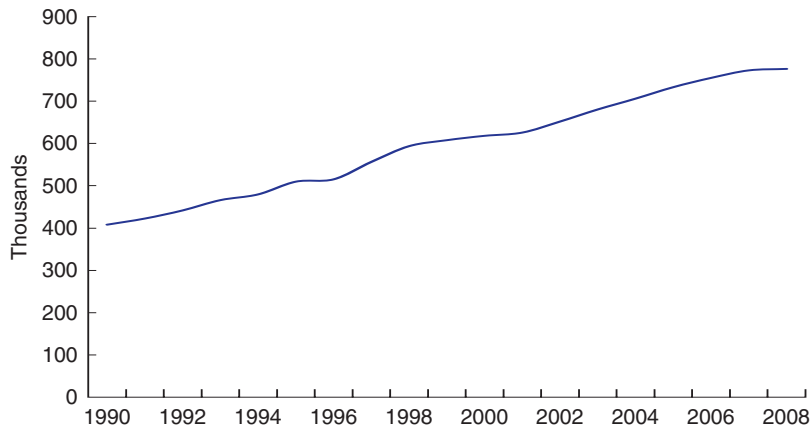
An individual enters the criminal justice system as soon as he or she is arrested. While jail detainees have been arrested for a crime, not all have been *convicted* of a crime (see box 1.1). If convicted, whether through a plea agreement or a court trial, the individual is sentenced, resulting in a number of possible sanctions. Figure 1.2 depicts the various roles the jail plays within the criminal justice system.

### Roles of the Jail

- *Jails hold individuals in pretrial status until they can post bond or are adjudicated.* Sixty-two percent of jail inmates are in pretrial status (Sabol and Minton 2007).
- *Some individuals leave the jail after a very short period of time, but if involved in a lengthy legal proceeding, they may be in the jail much longer than most sentenced inmates.*
- *Jails serve a punitive and/or rehabilitative function for individuals sentenced to a short period of incarceration.*

**FIGURE 1.1**

Average Daily U.S. Jail Population, 1990–2008



Sources: Gilliard (1999); Beck and Karberg (2001); and Minton and Sabol (2009).

**BOX 1.1**

**Jail and Prison: What Is the Difference?**

People often use the terms *jail* and *prison* interchangeably. However, jails and prisons have different purposes, authority, and populations. A prison is operated by a state or the federal government, while a jail is the responsibility of a county or city. There are 3,300 jails in the United States and 1,800 state and federal prisons (Stephan 2001, 2008). Because jails are locally operated, individuals housed in jails are usually much closer to home than individuals housed in prisons.

Prisons house people who have been convicted of a crime and have been sentenced. Jails also house people who have been convicted and sentenced, as well as those who are being held for violating release terms and those who are awaiting trial.

Jails typically house people for a much shorter time than do prisons. In fact, only 19 percent of those admitted to jail stay more than one month (Beck 2006). Of that 19 percent, only 4 percent stay longer than six months. In contrast, the average time served for first releases from state prison in 1999 was 34 months (Hughes, Wilson, and Beck 2001).

**FIGURE 1.2**  
Criminal Justice System Flowchart



Source: Adapted from Lindahl and Mukamal (2007).

Note: This flowchart is a simplified and generalized depiction of criminal justice processes. There is considerable variation by jurisdiction in how these processes and entities interrelate.

## BOX 1.2

### Criminal Justice Language

If you or others in your organization have not previously worked with individuals involved with the criminal justice system or criminal justice agencies, familiarizing yourself with these terms may be helpful when working with your local jail.<sup>a</sup>

- **Community Corrections:** Elements of the criminal justice system that take place in the community, including bail monitoring, sanctions in lieu of incarceration, and post-incarceration supervision.
- **Alternative Sanctions:** Individuals who commit misdemeanors and certain felonies may be sentenced to an alternative sanction to divert them from incarceration. Common alternative sanctions include supervision by a probation officer and community service.
- **Parole:** A form of post-release supervision for individuals released from incarceration, generally in state or federal prison. While on parole, individuals must meet certain conditions, which might include abiding by curfews, seeking and maintaining employment, or participating in drug testing and substance abuse treatment.
- **Probation:** A sanction imposed by the court requiring an individual to abide by specified conditions for a period of time under community supervision by a probation officer.
- **Cognitive Behavioral Treatment:** Therapeutic techniques designed to help individuals address problematic thinking patterns and actions (Chapman and Hough 1998).
- **Continuum of Care:** Coordination between corrections administrators and community-based partners to ensure that when an individual is released from incarceration he or she continues to have access to services.
- **Criminogenic Needs:** Factors that research has shown to be highly correlated with future criminal behavior and that can be changed.
- **Discharge Planning:** Preparation in the form of creating a written plan for an individual's release from custody, including that person's goals and the services and programs he or she should access. In some jurisdictions, discharge plans are referred to as case management, transition, reentry, supervision, or aftercare plans.
- **Evidence-Based Practices:** The conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual offenders by integrating individual clinical expertise with the best available external clinical evidence from systematic research (adapted from Sackett et al. 1996).
- **Felony:** A crime typically considered serious, such as murder, aggravated assault, rape, battery, arson, and some levels of drug sales. Conviction for a felony generally results in more than one year of incarceration in a state or federal correctional institution.
- **Gender-Responsive:** Taking into account that women's pathways to crime and needs are significantly different from those of their male counterparts.
- **In-Reach:** The process of community-based agencies working with offenders during their period of incarceration in a jail or prison setting.
- **Misdemeanor:** A crime typically considered less serious, such as petty theft, prostitution, simple assault, disorderly conduct, trespassing, vandalism, and minor drug possession. Conviction for a misdemeanor generally results in less than one year of incarceration or an alternative sanction.
- **Reentry:** The process of leaving prison or jail and returning to society. All returning inmates experience reentry, irrespective of their method of release or form of supervision, if any (adapted from Travis, Solomon, and Waul 2001).
- **Recidivism:** The rearrest, reconviction, or reincarceration of an individual. Reincarceration can occur through violation of post-release supervision requirements or committing a new crime.
- **Risk and Needs Assessment:** A system of assessing criminogenic risks and needs for the purpose of determining transition needs (Martin and Rosazza 2004).
- **Work Release:** Provides incarcerated individuals with the opportunity to work in the community while they are housed in a correctional facility. Work release acts as a transition from incarceration to the community. It is at times ordered by a judge.
- **Wrap-Around Services:** Supportive services, such as child care, vocational, educational, and transportation services, that are designed to improve an individual's access to and retention in primary supportive services, such as substance abuse treatment.

a. Unless otherwise noted, definitions have been adapted from Lindahl and Mukamal (2007) and Reentry Policy Council (2005).

In most jurisdictions, this means sentences of one year or less, although in some states (such as Massachusetts), people serve sentences of up to two and a half years in local jails.

- *Jails house individuals sanctioned for noncompliance with terms of parole, probation, and other community-based sanctions.* A period in custody, either prison or jail, is often used as a sanction for individuals who are in the community under some form of criminal justice supervision. Individuals may also be held in jails while awaiting the outcome of sanctioning proceedings. A violation occurs if an individual fails to meet the conditions of his or her community supervision.<sup>3</sup> A person is generally placed on probation in lieu of incarceration and on parole supervision after serving a period of incarceration in state or federal prison.

In addition to the roles outlined above, a local jail may house individuals sentenced to state custody but

not held in prison due to overcrowding or other issues. Jails with available capacity may also house individuals from other jurisdictions, individuals facing immigration violation proceedings, or other populations on a fee basis.

Many jurisdictions have specialized criminal justice programs or mechanisms that interact with the jail. There may be specialty courts for certain types of defendants, such as drug courts or mental health courts, which have specific programming and other requirements. The jail may have a work release program that allows inmates to go out during the day to work or look for employment while serving their jail sentence. Day reporting centers, to which individuals must report daily—usually to receive programming and services—operate in many communities as an alternative to incarceration or a post-release community reintegration facility or both. See box 1.2 for useful, frequently used terms that apply to the criminal justice system.

---

<sup>3</sup> Probationers and parolees are typically subjected to a number of conditions they must meet to serve their parole or probation sentence successfully. These conditions include staying drug and/or alcohol free, meeting curfew, and participating in programs such as anger management or employment training.



## 2

# Developing and Sustaining a Partnership with the Local Jail

**YOU MIGHT BEGIN A PARTNERSHIP** with a jail in a number of ways (see box 2.1). Your organization might decide to reach out to the jail to begin the partnership, or the jail might approach you. A collaborative effort might also be underway that allows both your organization and the jail to join as partners. This section begins by outlining the benefits of partnering with your local jail. It then provides six specific steps and several strategies that will be helpful in developing and sustaining a viable and productive partnership with the jail, however it begins.

### What's in It for You

As previously discussed, many individuals served by community-based organizations have been involved in the criminal justice system. Often, they have cycled in and out of correctional facilities, unable to transition successfully from incarceration to the community or to change the behaviors or circumstances that led them to incarceration. Engaging individuals in services while they are incarcerated, immediately after release, and thereafter greatly reduces the likelihood that these individuals will once again find themselves incarcerated. Developing a partnership with the local jail is an excellent way to ensure that an individual is connected to services in the community during these critical moments.

Benefits your organization may experience through a jail partnership include

- Becoming better able to serve the community population.
- Expanding outreach to your target population in the jail.
- Increasing program retention by “following” clients who end up in the jail and continuing their case management.
- Ensuring that vulnerable individuals are identified by the jail for release planning.
- Increased funding opportunities.

Your partnership with the jail could take several forms (see box 2.2). It might allow you to make initial contact with clients while they are in jail but only begin providing services upon release. The most comprehensive service provision, however, will occur in partnerships where the CBO is providing services to clients while they are incarcerated and continuing these services after release. Either way, your organization will be instrumental in forming the connection between the jail and the community. This is beneficial to the individual, to the community to which he or she returns, and to your organization, as you will be able to engage and better serve the client.

### Steps for Building an Effective Partnership

Consultation with dozens of CBOs and jails that have established successful partnerships resulted in the identification of six critical steps:

1. Identify and engage partners.
2. Identify common goals.
3. Determine roles and set the terms of the partnership.

## BOX 2.1

### Reentry Task Forces and Collaborations

The partnership steps laid out in this section assume a one-on-one partnership between your organization and the jail. However, your organization might be located in a community where a jail reentry task force or collaboration already exists, working together to address reentry needs for the larger community. If so, the best path to partnership might be to join the collaborative effort, along with your local jail. If your community does not have a task force or collaboration, you might find that your monthly or bimonthly meetings lead to the development of such a group. Below are two examples of taskforces and collaborations that were created in two jurisdictions to address growing partnership and reentry needs in the community.

**Kent County, Michigan:** The Community Corrections Advisory Board (CCAB) in Kent County has existed for 20 years. The CCAB's chief responsibility is to distribute and administer the area's community corrections grant funding. Over the years, the CCAB has evolved to become the focal point for all of the county's criminal justice discussions, becoming the de facto criminal justice coordinating council. Any citizen or agency that has a criminal justice process concern is encouraged to appear before the CCAB.

The Kent County Board of Commissioners appoints CCAB members, who represent a wide variety of criminal justice disciplines. In June 2008, the CCAB took formal recognition of the growing importance of inmate reentry programs in Kent County. Recognizing the importance of jail-based reentry programming, it established a standing subcommittee to broaden and unify the various reentry efforts taking place in the Kent County jail. This new subcommittee, the Community Reentry Coordinating Council, meets monthly. Its mission is "to promote public safety by assembling a group of collaborators who represent local agencies that work to identify and reduce the barriers that make it difficult for formerly incarcerated persons to reenter the community as productive members without returning to the jail."

**New York, New York:** The New York City Discharge Planning Collaboration was established in 2003, when the commissioners of the Department of Homeless Services and the Department of Correction sought to address the significant overlap between the populations they were serving. Many of the same individuals were cycling between the shelter system and the jail system. Since its inception, the collaboration has grown to include various city agencies and nearly 40 community-based service providers. The collaboration includes several work groups charged with addressing more specific issues related to discharge planning, including training needs, substance abuse, and child support issues that are often faced by individuals leaving the jail system. The collaboration also works to gain political and financial support for the projects in which it is involved. In addition, two direct service programs have been born out of the collaboration: Rikers Island Discharge Enhancement and Frequent Users Service Enhancement. Both programs are designed to improve reentry outcomes for men and women leaving Rikers Island.

4. Develop buy-in and staff capacity.
5. Develop accountability and communication strategies.
6. Develop external buy-in and identify stakeholders.

Every partnership is different and will face unique challenges as it develops. You might find that additional steps are needed in forming your specific partnership. The steps identified here are intended to guide you through the process (see box 2.3).

### Step 1: Identify and Engage Partners

The first step is to identify the individuals who will be directly involved in the partnership. Successful partnerships between CBOs and jails can be initiated

by either party. You may also have an opportunity to join an existing multiagency reentry effort.

Like CBOs, jails operate differently from one another. The best person to approach about the partnership may depend on your program idea and scope. If your organization is initiating the partnership, one of the first things you should plan to do is create a strategy for approaching your local jail leadership. The jail's volunteer or program coordinator may be able to help you organize a meeting with jail leadership. Before establishing contact, consider the following questions:

- What is your goal? (See step 2.)
- How do you plan to achieve it?

## BOX 2.2

### Initiating the Partnership

There are many ways partnerships between a community-based organization and a jail may form. Below are two examples of how successful partnerships were started. One was initiated by a CBO and the other by a local jail.

**Power Inside** started in early 2001 when its founder, Jacqueline Robarge, was invited to conduct a self-esteem class for women in the Baltimore City Detention Center. To meet the tremendous needs that the all-volunteer project encountered in the jail, Ms. Robarge received an Open Society Institute Community Fellowship Award to continue the program in the jail and to engage in community-organizing work to lay the foundation for a sustainable project. Fusion Partnership, Inc., became the host organization for Power Inside, which was awarded its first grant funding in 2003. Power Inside has grown to offer a range of services, including workshops and support groups inside and outside correctional facilities, case management and advocacy, a public reentry office, a young women's program, and street outreach to homeless women cycling through the jail system. The program maintains a strong relationship with the Maryland Department of Public Safety and Correctional Services and now offers services in several correctional facilities.

For the **Santa Barbara County Sheriff's Department**, as with many jails across the country, overcrowding was becoming an increasing problem. After realizing that the same individuals were cycling in and out of the jail, the Sheriff's Department sought to partner with CBOs to address the substance abuse needs of the jail population. Before partnering with CBOs, the jail was providing in-patient treatment services to individuals with drug and alcohol addictions. Wanting to develop a way to connect the in-patient treatment services provided in the jail to treatment services in the community, the jail formed the Santa Barbara Reentry Project. The project now connects the jail with a number of CBOs that provide various services to individuals once they have been released from jail.

- Why do you want to involve your local jail?
- How will this partnership benefit the jail?
- How will this partnership benefit clients?
- How will this partnership benefit the community?
- What will you need from the jail?
- How will you access the clients you will be serving?
- Are you looking to provide services while clients are still in jail, after release, or both?
- How much will it cost, if anything?

Having this information on hand will help you make the case to jail staff that entering into a partnership with your organization will be beneficial for all involved (see box 2.4). Your objective in meeting

### Client profile: Accepting Help to Take Responsibility

**Name:** Lamisha

**Length of stay in jail:** 2 months

**Program name:** Power Inside—Baltimore, Maryland

**How I learned about it:** A staff member approached me on the street. She was talking to me, telling me about the program and what it had to offer. Originally, I was skeptical and kept avoiding going to the office. For about a week or two, I would walk up to the office but wouldn't go in. I eventually I went in and noticed how warm, kind, and nonjudgmental all the staff were.

**Services currently receiving:** Through Power Inside, I have participated in group sessions, the outreach program, and used the day shelter.

**The most important thing I learned:** Power Inside has helped me learn the importance of having caring people in my life. The people here support me no matter what my decision is, and will never turn their noses down at me for my choices. They have helped me build up my self-esteem. Power Inside has helped instill a sense of responsibility in me. Through their help, I am in drug treatment. I know I can't walk out on the drug treatment program because they helped me get here and I respect them.

## BOX 2.3

### Gathering Information: Identifying Existing Community Services

There is no one-size-fits-all approach to developing a jail reentry program. As you begin to think about building a partnership with your local jail, you will want to have a good sense of the services your community currently offers and those it is lacking. This type of information gathering will assist you in designing your partnership and determining the services you might seek to provide. Below are some strategies your organization can use to gather information about services available in your community. Your organization does not need to take on these tasks to build a meaningful partnership with your local jail. However, if your organization has the capacity to perform this level of information gathering, it will likely be a worthwhile exercise that will help ensure that you are filling service gaps in your community.

**Case Flow Mapping:** Case flow mapping is a tool used by some communities to consider the following aspects of a jail reentry initiative:

- Do programmatic initiatives within the community match similar initiatives offered within the jail?
- Is there good coordination between the jail and community providers?
- Do jail treatment or transition staff reach out to community providers to assist community programs and enhance program continuity?
- What is the referral process?
- Is information shared between jail- and community-based programs?
- What are the major gaps in providing transitional care for people exiting the jail?
- What are the strengths of the current interagency collaborations?

For further information on case flow mapping, see the web-based *Transition from Jail to Community Implementation Toolkit* (<http://www.jailtransition.com/toolkit>), Module 8: Targeted Transition Interventions.

**Community Needs Assessment:** A community needs assessment is a comprehensive way of collecting data about your community and analyzing existing service gaps. A number of components can be incorporated into a community needs assessment. For an example, see *Starting Off on the Right Foot: A Needs Assessment of Reentry in Upper Manhattan*, [http://www.courtinnovation.org/\\_uploads/documents/UMRTF\\_Needs\\_Assessment.pdf](http://www.courtinnovation.org/_uploads/documents/UMRTF_Needs_Assessment.pdf) (published by the Upper Manhattan Reentry Taskforce).

**Mapping:** Geographic information systems mapping (GIS) is a powerful computer tool that can help identify the needs of your community in geographic terms, capturing important concentrations, patterns, and spatial data. To make use of GIS data, you need to work with someone who is familiar with the program. Unless you have someone at your organization who knows GIS, you will want to partner with an outside expert. If you are interested in using mapping, a good resource is *Mapping Prisoner Reentry*, <http://www.urban.org/publications/411383.html>.

with jail staff is to introduce them to your organization and program idea and to convince them to commit to working with you.

## Step 2: Identify Common Goals

Any partnership developed between your organization and the local jail will have an overarching goal of facilitating successful reentry. Your partnership, however, will also need a more specific goal. Clearly defining a common goal must begin with a mutual understanding of each partner's mission and how they relate to one another. Every organization has a mission that defines the purpose for which it exists. The missions of your organization and your local jail will likely differ. CBOs' missions are often

client-focused, while jails' missions involve ensuring public safety and security. However, your organization and the jail can come together around a common goal.

Working with jail staff to develop these goals is a valuable process in that it requires collaborative thinking and planning, which contributes to partners' understanding of what is being undertaken and why. This can be as simple as asking jail staff what programs they would like to see in place or what has been tried (successfully or unsuccessfully) in the past. Many good programs have been initiated by jail staff, who establish a role for CBOs knowing they themselves could not sustain or expand the program. In addition, creating mutual goals enhances buy-in from all partners.

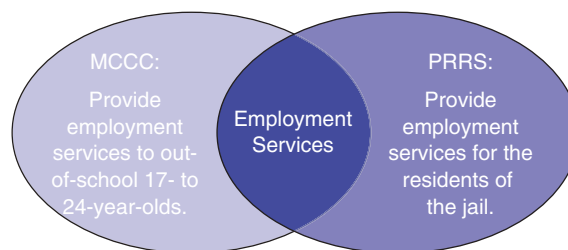
## BOX 2.4

### Finding a Mutual Goal

The Pre-Release and Reentry Services (PRRS) in Montgomery County, Maryland, has partnerships with various organizations in the surrounding community. Although the mission of PRRS might be different from the mission of the CBOs with which it works, their overlapping goals allow for these partnerships to exist and thrive, as illustrated by figure 2.1. One organization that PRRS partners with is the Montgomery County Conservation Corp (MCCC), whose mission is to increase the employability of out-of-school youths ages 17–24 by providing education and skills training. In addition, MCCC engages in projects that improve the community. The mission of PRRS is to maintain community safety by providing residential and nonresidential alternatives to incarceration and reentry services to adult residents. While the missions of PRRS and MCCC are different, their partnership is built on the common goal of promoting the employability of their respective clients. This common goal has served as the foundation for a partnership between the two agencies.

FIGURE 2.1

MCCC and PRRS Goal Overlap



### Step 3: Determine Roles and Set the Terms of the Partnership

After the appropriate partners have been identified and have agreed to a mutual goal, it is important to determine the role and responsibilities of each partner jointly. From the outset, it is vital that all members are on the same page regarding what the partnership expects to accomplish and how. One helpful tool in this process is a memorandum of understanding (MOU) (see table 2.1), sometimes referred to as a memorandum of agreement (MOA). MOUs are discussed in more detail below; however, it is important to note that not all partnerships require, or desire, an agreement as formal as an MOU.

Determining whether you want to develop a formal MOU or informal agreement with your local jail will be based on the type of services you are seeking to provide for your clients. Formal MOU agreements are developed for a variety of reasons. For example, the Santa Barbara County Sheriff's Department is required by county regulations to have a for-

mal MOU with every organization with which it partners. Formal MOUs might also need to be developed when funding is involved; however, this is not always necessary, and you should check with your funding source.

An MOU is intended to provide the specifics of the partnership and clearly define each party's role. Table 2.1 outlines 10 major components to consider when developing an MOU. All project partners should sign the MOU, creating a binding, formal agreement of participation. Sample MOUs are provided in appendix 1.

### Step 4: Develop Buy-in and Staff Capacity

For the partnership to succeed, you must have buy-in from the administration of your organization and from your local jail. As discussed in step 2, developing support may require background work. Even after the partnership has been established and has a formal agreement, not all the staff—in your organization or

**TABLE 2.1**  
Ten Components Often Found in MOUs

Component	Function
<b>Introduction</b>	Provides an explanation for the need for the partnership between your organization and the jail.
<b>Purpose</b>	Describes the common project goals and includes the plan the partnership intends to follow to realize those goals.
<b>Scope</b>	Identifies all partner members and stakeholders.
<b>Definitions</b>	Explains the specific roles of each partner.
<b>Policy</b>	Describes the circumstances under which the program services can be used and in which capacity they will be used.
<b>User Procedure Requirements</b>	Discusses rules and regulations all partners and stakeholders must follow, including training or educational seminars required by project partners.
<b>Maintenance</b>	Explains what needs to be done to uphold the purpose and requirements of the MOU.
<b>Oversight</b>	Discusses the management of each partner's responsibilities to ensure that each project partner is held accountable to its role.
<b>Responsibility Compliance with a Standard Operating Procedure</b>	Describes the use of each partner's standard operating procedure to ensure that each partner understands the other's operating guidelines as they may affect the activities of the partnership. Note that not all partners will have a standard operating procedure.
<b>Updates to the MOU</b>	Discusses who is allowed to update the MOU, the reasons that would justify updates, and how notification of updates will occur.

Source: SAFECOM (2004).

in the jail—may be interested in the partnership or understand why it has been created. Creating buy-in among staff—particularly among those who will be directly affected by it—is related to the staff capacity of the partnership. It might take some effort, but getting all partner staff behind the idea will result in a stronger and more effective partnership.

One way to create staff buy-in is to provide opportunities for joint organization and agency trainings. In these trainings, staff can be informed of the goal of the partnership and how it benefits various groups, including the clients being served, the project partners, and the larger community. The trainings can also provide an opportunity to discuss the importance of mutual respect between CBO and jail staff during day-to-day interactions, no matter what treatment is being given in return. Providing such trainings will allow staff to gain insight into how each partner approaches its work and how those approaches can complement one another through the partnership. The trainings can also be used to build motivation and

excitement for the partnership. Information sharing with correctional staff, though often neglected, is a key point of the partnership-building process. You might also consider having regular meetings with the jail administration to keep them informed and connected to the partnership. Such meetings will help sustain and create future buy-in and support. Below are two additional strategies you can use to foster buy-in:

- Keep the communication between your organization and jail staff open. This practice will allow jail staff to express concerns as they arise and demonstrate that their input regarding the partnership is valued. Make sure you get to know the staff and the importance of their work.
- Include jail staff throughout the process of developing, implementing, and sustaining the partnership. This approach will help break down any walls caused by the jail culture and foster higher levels of trust between your staff and the jail staff.

## Step 5: Develop Accountability and Communication Strategies

For partnerships that develop an MOU, accountability strategies will more than likely be addressed in the “oversight” section. However, for those partnerships that choose to use a more informal agreement, it is important to develop an agreed-upon strategy that will allow partners to hold each other responsible for their roles and commitments. The following three tools for developing accountability and building communication capacity are highlighted below:

1. Regular meetings between partners and stakeholders.
2. Information sharing.
3. Reports on performance measures.

These are just three examples of ways to build this important component into your partnership. Your organization should think creatively with your jail partners to articulate strategies unique to your particular collaboration.

### *Convene Partners Regularly*

Bringing partners together is an excellent way to ensure accountability and increase communication among those involved in the partnership. Such meetings provide an opportunity to hear about the progress made by the partnership and to address any problems that have arisen. Moreover, these meetings can be used to engage new partners and to share information relevant to the partnership. It is a good idea to have these meetings on a consistent basis, such as monthly or bi-monthly. These meetings should occur as often as needed but should not burden the working group. There should be clear timelines for completion of key tasks.

### *Share Information*

Like regular partnership meetings, sharing information is a way to increase communication among partners. While sharing information is very beneficial, confidentiality concerns can arise (see box 2.5). When working with your local jail to determine what information can be shared, remember that there may be laws and policies in place that determine what infor-

### **BOX 2.5**

#### Overcoming Confidentiality Concerns

Confidentiality concerns can develop when your organization wants to obtain personal information from the jail about clients, including health status. Creating a waiver of confidentiality might be necessary in order to obtain this information from the jail. Some organizations use confidentiality waivers to share information. For example, at Bert Nash Community Mental Health Center and DCCCA, Inc., in Lawrence, Kansas, clients are offered the option to sign a waiver. Once the waiver is signed, information from the client’s jail file is shared with the organization. This information is helpful in developing comprehensive plans for the client. For an example of a confidentiality waiver, see appendix 1.

mation the jail can provide to you and what information you can provide to the jail.

### *Report Performance Measures*

As one of the primary players in the partnership, you will need to think strategically about the areas in which the partnership needs to improve and advance. A useful way to do this is to periodically assess what is and is not working within the partnership. During partnership meetings, ask project partners to report on agreed-upon performance measures that are tied to project goals. This process requires each partner to be clear about what he or she is trying to accomplish and what needs to occur in order to accomplish it. In addition, you can request that all partners complete a survey every 6 to 12 months on partnership relations, program components, partnership goals and timelines, and suggestions for areas of improvement.

## Step 6: Develop External Buy-in and Identify Stakeholders

Once you have a clear sense of who the project partners will be and what the partnership is going to do, it is time to develop buy-in with the larger community and begin to develop a strategy to sustain your partnership. Stakeholders are individuals or organizations with a direct or indirect interest in the partnership because it affects them in some way. These

individuals and organizations often include, but are not limited to, elected officials, community board members, employers, other CBOs, and representatives from governmental agencies, such as the police department and probation offices.

Prepare as you did for your local jail when approaching possible stakeholders about the partnership. These individuals will likely have a number of questions about why they should get involved in the partnership and about their level of participation. Such questions might include

- How will this activity affect our organization?
- How will being involved benefit us?
- What will be required to make this collaboration work?
- What resources are needed to accomplish the work?
- What organizational outcomes should be expected?

Be clear from the beginning about what you expect from stakeholders. Community stakeholders bring expertise and guidance to the partnership, as well as additional resources. Also keep in mind that identifying stakeholders and involving them in the partnership are processes that will continue throughout the partnership.

## Working Together to Improve Client Outcomes

One of the benefits of partnering with your local jail to address the needs of clients is that you will be working *with* the jail to meet the needs of clients and help improve their quality of life upon release. Working together will relieve some of the pressure both parties feel when trying to do this work alone. This section presents four basic ways in which you can work with your local jail to improve client outcomes. For more ideas, see appendix 2 for examples of CBO and jail partnerships.

### Screening and Assessment

By determining the risks and needs of the jail population, screening and assessment provide the foundation for a system that ensures that the right interventions are directed toward the right individuals. Using the information provided by screening and assessment,

your jail and CBO partnership can direct individuals with the appropriate risk and need level to your services.

Your organization may conceive of risk and need differently from the jail and other criminal justice partners. For jails, *risk* refers to the risk of reoffending or returning to jail custody,<sup>4</sup> and *need* refers to the criminogenic needs of an individual—that is, those things about the person that must be changed to reduce their likelihood of future criminal behavior. In this context, risk screening is a quick process focused on dividing the jail population into high-, medium-, and low-risk categories in order to target interventions to the higher-risk population, where success will have the greatest public safety benefit. Needs assessment, which requires a more comprehensive instrument, identifies specific criminogenic target areas for intervention, such as alcohol dependency or criminal thinking patterns.

Depending on your organization's focus, *risk* and *need* for you might mean something different, such as public health risk, risk of homelessness, or the need for the services that you provide. For this reason, you might consider conducting screens or assessments based on your discipline; however, you should first find out whether the jail conducts screening and assessment that can provide you with the information that you need. In either case, taking time to address these different perspectives and work toward common language and understandings can minimize the potential for confusion and working at cross-purposes in the future.

Here are some questions to consider before approaching jail staff about screening and assessment information:

- Does the jail currently screen and assess each client?
- When do the screening and assessment occur?
- Who conducts the screening and assessment?
- What type of information is obtained from the screening and assessment?
- Does the jail share the information with any of its current community providers? If so, with whom?
- Would you be able to gain access to the information collected?

---

<sup>4</sup>Risk is also used in the jail classification process to refer to the risk of misconduct within the institution, which is different than the post-release risk of recidivism.



- If necessary, would you be able to add questions to the instruments currently being used by your local jail?
- How will you share the information you gather with the jail staff?

## In-Reach

Jail-based services provided by community organizations, also known as “in-reach,” are extremely important. Instead of going into the community to identify and recruit participants for your programs and services (outreach), you are entering an institution that is somewhat separated from the community to find and engage your target population (in-reach). Developing a relationship with clients while they are incarcerated will increase the likelihood that they will engage in services provided by your organization after release. As previously discussed, this continuum of care is an essential part of a successful transition from jail to the community. In fact, some jails will not work with CBOs unless they agree to provide continued services to individuals after release. For those with short lengths of stay, beginning the relationship may be all you can do before release.

A helpful example of in-reach is the Hampden County Public Health Model for Corrections. This partnership works to bridge the gap between health care in the jail and in the community. Administrators at Hampden County Correctional Center provide access to health care providers to treat chronically ill clients while in jail. The center has also contracted with service providers in the communities where the majority of clients return upon release. Clients receive services from the same health care provider while in jail as they do in their own community after release.

Keep in mind that there will likely be challenges associated with doing in-reach. Jails are not designed to grant community members access to the incarcerated population. Gaining clearance to meet and work with the jail population and to move freely within the jail setting will take patience and understanding. During this process, it will be important to remember that the jail staff are not trying to prevent you from doing the work you want to do; they are merely ensuring that they can do their job and keep the institution safe for everyone. To overcome such logistical challenges, some jurisdictions have developed procedures to allow CBOs to enter the facility

with greater ease. These procedures allow individuals who have already undergone security checks to enter and exit the facility without having to obtain multiple clearances and answer numerous questions.

## Discharge Planning

Discharge planning is an approach use some jails to connect individuals with resources and services in the community before release. In effect, individuals who receive discharge or transitional planning services are provided with referrals to the community-based organizations whose services best suit their needs (which are ideally identified through a screening and assessment process). Many individuals leaving jail will have immediate needs that must be met, including clothing, transportation, and housing. Discharge planning allows for these needs to be addressed, helping increase the chances that the client will be successful upon release. Common discharge planning services include

- Providing resource guides and handbooks.
- Informing clients about community resources and setting up initial appointments.
- Preparing applications for identification documents and public benefits (see box 2.6).
- Providing a temporary supply of medication and prescriptions.

Many individuals exiting jail will not have anyone to meet them at the gate when they leave. To address this issue, some discharge planning programs provide transportation at the moment of release. For example, the Davidson County Sheriff’s Office has formed partnerships with CBOs to have mentors meet clients at the gate when they are released. Through the Meet Me at the Gate program, mentors first enter the facility and develop relationships with clients before release. Then, on the day of release, the mentor comes to the jail to pick up the client and take him or her to initial appointments or to community-based services.

## Community-Based Service Provision

As a community organization, you are already providing community-based services. Because the population you work with often overlaps with those in jail,

## BOX 2.6

### The Process of Applying for Government Benefits While Incarcerated

Many who have been incarcerated rely on government benefits, such as public assistance and Medicaid, after their release as they search for employment and get themselves stabilized in the community. During a period of incarceration, however, a person's benefits are often suspended or even terminated. Reinstating these benefits can take a long time—up to 90 days. This is too long for those who are in immediate need of drug treatment, medical care, and food stamps.

To address this issue, the Rikers Island Discharge Enhancement (RIDE) program set up “single stops” in two jails in New York City (NYC). At these single stops, men and women who have been sentenced to jail time can apply or reapply for Medicaid and food stamps. Funded by the Robin Hood Foundation, the single stops are staffed with counselors who have been trained and approved by the NYC Human Resources Administration to assist people in applying for government benefits.

The length of the approval process varies depending on whether the person can supply all the information needed for the application. However, the typical turnaround is weeks, not months. Thus, the benefits are typically in place upon release or shortly thereafter.

initiating an effort to work with clients while they are incarcerated can improve your organization's service in the community. By partnering with your local jail, you can develop protocols for sharing helpful information about client needs and provide services such as discharge planning. This practice will allow your organization to better serve your target population by engaging them sooner and knowing who most warrants scarce resources. Ultimately, a partnership with your local jail will make your organization a stronger service provider in your community.

### Putting It All Together

Partnerships are indispensable for effective jail reentry because it requires work before and after release, both in the jail and in the community. No single entity has the responsibility or the capacity to do it alone. In an ideal transition process, the people in the jail with the greatest risk—to the community and to themselves—would be identified and their needs assessed to direct them to the appropriate programming and thereby increase their chances of success. Relationships with community organizations would begin in the jail before release, a plan based on assessment would be created, and that plan and those relationships would guide individuals to where they need to go in the community after release.

### Sustaining the Effort

According to the United Nations High Commissioner for Refugees (2003), there are 13 fundamental principles to consider when forming a partnership. Although many of these principles are addressed in the six steps identified earlier in this section, they must be carried out beyond the establishment of the partnership for the partnership to continue and thrive. These principles will form the foundation of how you work together to assist people returning to the community from jail.

1. *Strive to understand each other's point of view.* CBOs and jails often have different perspectives on the way they approach their work. Taking the time to understand each perspective is important in creating a strong partnership.
2. *Seek opportunities to learn from each other.* Learning from each other can be one of the best ways to better understand how an organization or agency goes about fulfilling its mission. Having partner staff work and train together provides an opportunity to build relationships, develop a better understanding of jail work culture, and create a seamless service provision continuum from the jail to the community.
3. *Commit to excellence and improvement.* The most successful partnerships are built on commit-

ments from all partners to work at the highest possible level toward the project goal. The many challenges of working with the jail population make this commitment all the more important.

4. *Commit to transparency and information sharing.* Sharing information and being open and honest with the jail will create the trust necessary for the partnership to grow and develop.
5. *Look for synergy.* All partners bring a particular expertise to the table. To capitalize on this, create one cohesive unit with your local jail that will work to address problems and meet goals.
6. *Think “win-win” when interacting with each other.* Each party needs to feel that they are a part of the process and that they are gaining something from the partnership. Developing clear and specific communication protocols will allow for your organization and the jail to make the most of each interaction.
7. *Endeavor to communicate in all directions.* All partners need to feel as though they understand what is going on. Keep in mind that communication is not just a monthly meeting but can also include smaller meetings as needed, regular phone calls, and e-mails.
8. *Plan and solve operational problems together.* As problems arise, plan to work with your local jail to come up with creative solutions. Solving problems together will also help create synergy and trust within your partnership.
9. *Establish coordinating mechanisms and processes that facilitate continuous prioritization.* Creating task lists and timelines specific to each partner will help keep everyone on track and focused.
10. *Respect each other’s expertise.* Your organization and the local jail are working together to serve the same population; however, remember that you each have a different area of expertise that is valuable to the partnership.
11. *Define roles, limits, and standards, and agree to respect them.* All partners will have specific roles to fill to make this partnership successful. It is important that these roles—and the limits and standards associated with them—are clearly defined, agreed upon, and respected by all partners.
12. *Identify policy gaps, set policy, and share that policy with all those who are concerned during all stages of implementation.* Jail policy will be an important factor in building this partnership. Address any policy issues that arise as soon as possible, because failing to do so could create barriers to building the partnership and providing services to clients. Consider creating policies with the jail staff that are specific to the partnership.
13. *Commit to training at the earliest stage of the operation.* Training at the earliest stages of the partnership will help to facilitate cohesion. However, training should be ongoing, providing partners with the opportunity to continually learn from each other and improve the partnership.

A partnership with your local jail can be a key part of building toward such a process, to the benefit of your organization, of the jail, and, most important, of the clients. Your organization should adapt these steps to fit your culture, goals, and the specifics of your local partnership and use them to support your efforts to promote successful reentry.

# 3

## Working with the Jail Population and in the Jail Environment

**THE JAIL POPULATION AND THE JAIL AS** an institution have unique aspects you will want to consider as you build a partnership around jail reentry. This section outlines some of the common challenges that affect the jail population's ability to succeed after release, as well as system factors that will affect your work with the population. It also discusses the culture of the jail and how to approach jail staff in a way that minimizes the likelihood of misunderstandings.

### Challenges Facing Jail Populations

Social disadvantages are common among the incarcerated. People who go to jail experience higher rates of health problems and homelessness, and lower employment rates and educational levels, than the general adult population (see box 3.1). It is likely that you have recognized some of these same disadvantages among some of your clients, and perhaps your organization provides services to address these needs. For formerly incarcerated people, these issues can create a number of barriers as they return to the community.

### Substance Abuse

Nearly 70 percent of the jail population meets the criteria for substance abuse or dependence, compared to only 9 percent of the general population (Karberg and James 2005). However, less than one-fifth of convicted jail inmates who meet the criteria for abuse or dependence receive formal treatment or other programs after admission to jail. In addition, accessing treatment in the community after release can be difficult. Lack of insurance, conviction-based bans on

receiving public assistance, or the lack of available treatment can create substantial barriers to post-release substance abuse treatment.

### Mental Health

Twenty-four percent of individuals in jail exhibit symptoms of mental illness; 18 percent report receiving treatment after admission (James and Glaze 2006). The most common form of treatment in jail is medication, not counseling or therapy, which may be needed to help an individual manage his or her illness.

### Physical Health

The jail population has rates of communicable diseases that are much higher than those of the general population. Four percent report having tuberculosis, 2.6 percent report having hepatitis, and 1.3 percent report having HIV (Maruschak 2006). In addition, 37 percent report current medical problems, physical impairments, or injury needing treatment. Rates of chronic diseases, including arthritis, asthma, hypertension, and heart problems, are high in the jail population. While many who need medical care in jail receive it, few of these individuals continue to receive it once they are released.

### Education

Sixty percent of individuals in jail lack a high school diploma or its equivalent, compared to 18 percent of the general population age 18 and older (Harlow 2003). Despite the population's high need for education, educational opportunities in jail facilities are

### BOX 3.1

#### Gathering Information: Understanding the Needs of the Jail Population

Developing a portrait of your local jail population will allow your organization to better understand the needs experienced by individuals returning to your community. Gathering this type of information will help determine the target population to be served by your partnership. It is also useful in preparing statements of need or problem statement sections of grant applications. Below we discuss strategies you can use to gather key information on the jail population.

Such information can also provide insight into how to deliver services and program content. Will your organization need to be able to serve non-English speakers? Does a large portion of your target population lack the literacy necessary to use workbooks or other printed material provided by your organization? Knowing the answers to questions like these can make a big difference in the success of your program.

**Access Existing Data:** Extensive data about the population may already exist to assist you. If you have a large jail system in your community, it might have a research department you can utilize for information. Annual reports and other statistical reports on the jail population may be publicly available, either from the jail itself, local academics, or a government agency to which the jail is accountable. For more information, see *The Report of the Reentry Policy Council, Policy Statement 2: Developing a Knowledge Base* at <http://www.reentrypolicy.org/Report/PartI/ChapterI-A/PolicyStatement2>.

**Screening and Assessment:** Screening and assessment instruments are used to identify the risk and need factors of individuals in the jail. Information such as history of substance abuse, homelessness, or mental illness can be of great value in determining who should participate in programming or services from your organization and can help you tailor your approach to individual clients. What relevant screening and assessment information exists, and in what manner it might be made available to your organization, can be part of the discussion that establishes the terms of your partnership with the jail.

**Surveys and Focus Groups:** One of the most valuable sources of information on the jail population is the population itself. Surveys or focus groups of people in the jail or recently released can be used to inform program design and delivery, as well as to help your organization better understand program success and identify areas for improvement.

limited. The most recent statistics available from the Bureau of Justice Statistics indicate that only 24.7 percent of jails offer adult basic education programs, and 54.8 percent offer secondary programs.

### Employment

In 2002, 59 percent of individuals in jail reported no employment or limited (occasional or part-time)

employment during the month before their arrest (James 2004). With the wide reach of the Internet, employers can easily access criminal records of prospective employees, and a criminal record carries significant stigma in the job market. Very few jurisdictions have laws to address this stigma by protecting people with previous arrest and conviction records from employment discrimination. In addition, a growing number of state and federal laws require

#### Client Profile: Seeking Help

**Name:** Michael

**Length of stay in jail:** 18 months

**Program name:** Dorchester Bay and Boston Reentry Initiative—Boston, Massachusetts

**Services currently receiving:** I have received job assistance, help with finding stable housing, as well as seeing a counselor.

**The most important thing I learned:** Wanting to change is not something another person can force upon someone. There is plenty of help available, but in order to receive the full benefits of the various programs, you have to want to help yourself. This program has taught me the importance of wanting to better myself, and there is nothing wrong in seeking the help of others.

### **Client profile: Building a Community Support Network**

**Name:** Thomas

**Length of stay in jail:** 1 year

**Program name:** The Osborne Association's Fresh Start Program—New York, New York

**How I learned about it:** The staff of the Fresh Start Program advertised the program while I was on Rikers Island along with giving me fliers that contained information about the program.

**Services Currently Receiving:** Through the Fresh Start Program, I participated in various life skills groups. Some of the main services I received were relapse prevention, job readiness, one-on-one counseling, vocational training, and discharge planning.

**The most important thing I learned:** I learned the importance of building a support network that I can trust. This has helped me to achieve my goal of staying drug and alcohol free. Through this experience, I also learned that developing a solid plan of action is critical to my success.

employers and licensing agencies to disqualify a person with a criminal record from certain types of jobs.

### **Housing**

Fourteen percent of the jail population was homeless at some point during the year before incarceration (James 2004). Individuals in jails with substance abuse and mental health problems are twice as likely as other inmates to have been homeless in the year before their incarceration (James and Glaze 2006; Karberg and James 2005). Incarceration can exacerbate difficulties with stable housing, both through disruption of housing arrangements and the addition of housing disqualifications. Many public housing authorities, for example, exclude individuals with criminal histories—particularly with drug convictions—from living in public housing, regardless of whether their families want them to return to live there. As with employment, the ease with which landlords can conduct criminal records checks over the Internet can enhance barriers to finding stable housing.

### **Family**

Many of the 9 million people who cycle in and out of local jails are parents, and their incarceration and release affect their children as well. The number of custodial parents in jail is not known; however, estimates for the prison population suggest that over 809,000 parents are incarcerated in prison. Approximately 744,000 of these individuals are fathers (Glaze and Maruschak 2008). In 2004, over 1.7 million children under the age of 18 had a par-

ent in a state or federal prison. The majority of incarcerated parents report that they did not live with their children before their arrest and incarceration, but over half provided primary financial support for their children before going to prison. It is likely that parenthood is similarly prevalent in the jail population.

### **Challenges to Providing Services in a Jail**

Given that a large number of CBO clients have had contact with the criminal justice system, you may be familiar with some of the challenges that accompany working with an incarcerated or formerly incarcerated population. Providing services in a jail setting, however, presents an additional set of obstacles. It is important to keep these challenges in mind as you begin to think about the type of partnership you would like to establish with your local jail and about the services you intend to provide.

### **Variation in Jail Populations**

Jails serve as a holding place for a wide range of individuals, such as

- Individuals awaiting trial, conviction, or sentencing.
- Individuals convicted of a crime and generally sentenced to a period of incarceration of less than one year.
- Individuals who have violated—or who have been accused of violating—the conditions of

their parole or probation supervision or the conditions of another community-based sanction program.

Both individuals held for very minor crimes and those who are held for very serious crimes will be present in the jail. This mixed population can make planning for programs, release, and reentry challenging, as each group will have a different set of needs. Risk and need factors relevant to the programming your organization seeks to provide will be present in all three jail population groups, but housing and other considerations affecting program access will vary across the groups. Service providers in jails often find themselves working with individuals who have varying needs while simultaneously navigating logistical challenges related to bringing together individuals housed at different security levels.

### **Brief Stays**

An overwhelming majority of the jail population is in jail only briefly. Many spend less than 72 hours in the facility. It is difficult to assess a client's needs properly, let alone provide effective and appropriate interventions, in such short periods of time. For instance, the amount of time most individuals are in jail—less than one month—does not allow for the completion of a GED program or a 30-day drug treatment program. Unpredictable release dates for individuals in jail add another challenge to delivering programming and devising a post-release treatment plan. For all these reasons, interventions in the community after release are central to successful jail reentry efforts.

### **Low Capacity for Service**

Due to limited funding, staff, and space, jails generally do not have the capacity to provide adequate programming to address all the needs of their clients. As previously discussed, clients confront considerable challenges, including substance use, mental and physical illness, and lack of housing and employment. Many jails do not currently have community service providers who come into the facility to enhance their service capacity. This is an area in which CBOs can help jails expand their intervention capacity and better serve the population.

### **Differences in Size and Scope**

Jails are typically administered by counties or cities. Due to the range in jail population capacity and the range in jail locations—rural, suburban, or urban—diverse policies and procedures exist for supervision, management, and treatment. No uniform jail policy exists in the United States.

### **Limited Programming Space**

Providers who come into the jail facility may find limited space for delivering their services, particularly in group settings. Some spaces that are available for use present a challenge for service provision. Due to overcrowding, space once used for programs might be reallocated for operational needs. Many older jails were not designed to house programs. In addition, jails often have limited technological capabilities, such as computer access and access to other electronic training materials.

### **Absence of a Designated Community-Based System**

In most jurisdictions, no agency or organization is responsible for facilitating a connection between the jail and community-based providers to offer post-release support. In the absence of that facilitation, CBO and jail staff are often uncertain how to make that connection for inmates as they are released. Although clients might be able to make progress while in jail, they are often released with little or no guidance on where to obtain these services in the community. Making contact with the client before release creates a relationship with a specific person within the organization. Creating such relationships is crucial for bringing people exiting the jail across the bridge into the community. If personal contact with a potential client cannot be made while the individual is incarcerated, material can often be distributed inside the jail, providing points of contact and encouraging service access upon release.

### **Understanding Jail Culture**

In addition to challenges associated with working with an incarcerated population, navigating jail organizational culture can be difficult for service

providers. A jail’s first priority is to ensure the safety and security of those who are inside the jail—both clients and staff. For this reason, security takes precedence over programming. This approach can be a very frustrating aspect of working with a jail; however, taking the time to understand the jail’s culture will help your organization develop strategies to overcome these challenges. Making connections with jail staff can go a long way toward improving this process. Table 3.1 provides some key questions to consider when learning more about your local jail.

## What to Expect from Jail Staff

Understanding the fundamental differences in the way your organization’s staff and the jail staff approach their work will be key in developing an effective partnership. If you are considering providing services in the jail, staff might not be open to the changes that will have to occur. Such resistance could arise for a number of reasons, including safety concerns. Jail staff might also believe that the required changes increase their workload, since facilitating inmate movement

**TABLE 3.1**

Key Questions: Familiarizing Yourself with the Culture of Your Local Jail

Goal	Question
Better understanding of the environment inside the facility	<ul style="list-style-type: none"> <li>■ Who has a substantial impact on the facility’s culture, through both formal and informal authority?</li> <li>■ What is the chain of command in the jail, and with whom is it appropriate to communicate on matters concerning your work in the jail?</li> <li>■ Does the jail staff understand why it is important to deliver programs and transition planning?</li> <li>■ What are the values that underlie the relationship between the facility and the community?</li> <li>■ What is the jail’s present relationship with providing agencies?</li> <li>■ How much does staff know about the work you will be doing with the jail population?</li> <li>■ Who are the key stakeholders that you need to engage as you begin this process?</li> </ul>
Clear partner perceptions of one another	<ul style="list-style-type: none"> <li>■ What is the perception of provider agencies by jail administrative staff?</li> <li>■ What are the perceptions by jail line staff?</li> <li>■ What are the values that underlie community stakeholders’ perceptions of the jail facility and staff?</li> <li>■ What values underlie the jail leadership’s and staff’s perceptions of community stakeholders?</li> <li>■ What are the key activities that could help the jail staff change their perception of these issues over time?</li> <li>■ How will all of this affect their jobs as correctional officers and command staff?</li> <li>■ What benefits can be gained, from their perspective?</li> </ul>
Better understanding of jail programs	<ul style="list-style-type: none"> <li>■ How has the facility dealt with jail programs in the past?</li> <li>■ Does the jail have program staff?</li> <li>■ What programming is the jail currently providing?</li> <li>■ What has been the jail’s experience in working with jail populations?</li> <li>■ What is the perception of reentry and its impact on the jail?</li> <li>■ What is the process of regularly entering the facility as a provider?</li> <li>■ Is there space dedicated to the provision of treatment services?</li> <li>■ Is the space conducive to the work that needs to be done?</li> <li>■ Is this a safe environment to provide services for clients?</li> </ul>

Source: Authors.



to and from your programs or services will be their responsibility. In many cases, this resistance is related to the fact that they do not understand the need for providing services to the jail population. It is best to go into the partnership knowing you will have to do outreach to the jail staff to help create program buy-in. Explaining to jail staff why you are there can help alleviate any tension.

It is also important to bear in mind what jail staff will expect from you, including respect, courtesy, punctuality, professionalism, and adherence to the rules of the facility. Over time, consistency in meeting these expectations will contribute more to the jail staff's acceptance and support for your program than anything else you will do. Below are some steps you can take to improve your working relationship with jail staff.

### *Meet with Key Staff*

Make an appointment with the reentry or program director, or perhaps with the jail administrator or sheriff in a smaller jail system. It is important for the jail administration to understand the work you want to be doing with the jail. This is an opportunity to demonstrate your understanding of, or desire to understand, the jail's needs. You will also need to gain their support. Ask how your organization can help them. Be prepared to have several conversations about what you plan on doing, since you may need to communicate this information either up or down the chain of command.

### *Do Your Homework*

Make sure you understand the perspective of key members of the jail leadership and line staff. An easy way to do this is to visit the department's web site to learn about their present mission and services. What other program and reentry activities are underway? It is also a good idea to have a basic understanding of effective practices with this population and of how the programs you are proposing are built from this research.

Once you are ready to begin coming into the jail regularly, make sure to familiarize all staff and volunteers who will be entering the jail with basic facility rules. Jail facilities will have rules regarding dress, what items can and cannot be brought into the facility, and what areas of the facility people providing programming can access. The jail may have an orientation or a handbook that addresses these issues, but it is good practice to be proactive in asking your jail partners about these rules. You may also want to learn about the daily schedule of the jail and at what times it will not be possible to conduct programs or meet with clients due to activities such as shift change or inmate count.

### *Identify What You Will Need from the Jail*

What will you need to deliver services? A room to facilitate groups, or an office to complete interviews? Will you need to coordinate meetings with clients at release? What time of the day can your staff be at the facility, and does this conflict with daily operations (e.g., shift change)? You may not initially know all the answers to these questions; however, identifying what support you need from the jail will be critical in setting the right expectations for your partnership. It will be helpful if you make clear which requests would be ideal and which are "must haves." You should be ready to communicate this information in a short proposal outlining your intended services and activities.

### *Benefits to the Jail Staff*

Think about ways your proposed partnership will benefit jail staff and their mission. For example, these programs often help reduce recidivism, thus helping the jail reduce its population over time and, more importantly, helping the jail achieve its public safety mission. The existence of programming in the facility helps reduce idleness and maintain order. It also increases the number of services that can be provided in the jail with existing staff and better positions jails to secure grant resources in partnership with community organizations.

# 4

## Examples of Strong Partnerships between CBOs and Jails

**SEVERAL PROMISING PRACTICES HAVE** been developed around work with correctional populations, and it would be wise to draw from these practices as you develop your partnership with your local jail (see box 4.1). Building your partnership on existing principles not only will be helpful in creating an effective initiative but also may increase funding opportunities, as well as the level of buy-in you receive from your local jail's administration. The partnerships outlined below are considered to be model programs in the jail reentry field. A brief synopsis of each partnership is provided to demonstrate how the partnerships work. When available, a web address to learn more about outcomes associated with these partnerships is provided.

### **Rikers Island Discharge Enhancement**

Developed in 2004, this partnership involves the New York City (NYC) Department of Correction and a number of CBOs in the city, including the Osborne Association, Women's Prison Association, Fortune Society, and Volunteers of America. The goal of the Rikers Island Discharge Enhancement (RIDE) program is to link incarcerated clients with appropriate health and human service organizations in the community through a coordinated, collaborative effort to provide a continuum of care during the reentry process.

The RIDE program is voluntary and open to sentenced individuals leaving Rikers Island, the largest jail in NYC. Participants receive services from one of several nonprofit, community-based

service providers both while they are incarcerated and for up to 90 days after release. Upon release, participants are immediately connected to services in the community through transportation from the jail to the provider's office. Each participant is assigned a case manager who coordinates service provision, provides guidance and support, assesses milestones and progress, and maintains client engagement.

RIDE has achieved positive results. According to a study conducted by White et al. (2008), participants in RIDE who stayed engaged for the entire 90 days of post-release services experienced significantly fewer, and more delayed, returns to jail in comparison to those who did not participate in the program.

### **Hampden County Public Health Model for Corrections**

Based in Ludlow, Massachusetts, this partnership includes the Hampden County House of Corrections, Lemuel Shattuck Hospital, Baystate Medical Center, Tufts University School of Dentistry, and Behavioral Health Network, along with various other community health providers in the Springfield and Holyoke areas. The original partnership was founded in 1992 with the objective of providing a comprehensive spectrum of health care services beginning within the first days of incarceration and continuing into the community upon release. The model emphasizes wellness, health education, and prevention, using a proactive—as opposed to reactive—approach to quality health care. The partnership serves a public health sentinel function in the

## **BOX 4.1**

### **Principles of Effective Intervention**

The following principles have been identified by practitioners and researchers as best practices in community corrections:

- Assess the risks and needs of clients (see the screening and assessment section of chapter 2 for further discussion).
- Enhance intrinsic motivation (motivation within the individual).
- Target interventions:
  - Prioritize supervision and treatment resources for higher-risk clients.
  - Target interventions to needs associated with continued criminal behavior.
  - Be responsive to temperament, learning style, motivation, culture, and gender when assigning clients to programs.
  - Structure time for high-risk clients.
  - Integrate treatment into the full sentence or sanction requirements.
- Use cognitive-behavioral treatment methods.
- Increase positive reinforcement.
- Engage ongoing support in the community.
- Measure relevant processes and practices.
- Provide measurement feedback.

*Source:* Bogue et al. (2004).

community and is fully integrated with local and regional social services.

The jail and health services staff work together to assess the mental and physical status of each incarcerated client, so that clinical decisions about immediate needs and serious health problems can be made. Treatment—whether for physical, mental, or dental health—is provided based on the individual’s treatment plan. Prevention measures begin during the individual’s intake assessment and continue throughout the client’s time in jail. Some of the key prevention services available include HIV counseling and testing, hepatitis C counseling and treatment, screening exams for infections and chronic diseases, dental health education, smoking cessation counseling, and regular wellness activities. Similar to the prevention measures, health education begins during the client’s orientation and continues throughout his or her sentence with one-on-one education, group education sessions, and resource materials. Discharge planners and case managers work together to develop a plan to help the

client be successful upon release. The doctors who see clients in the jail also see clients in the community. At admission to the jail, each client is referred to a local community health clinic based on his or her zip code. These community health clinics provide services to clients both while incarcerated and after release.

Based on research conducted by the Hampden County Correctional Center, more than 88 percent of HIV-positive clients referred for ongoing care after release from the correctional facility keep their initial medical appointments at their designated community health center (Conklin, Lincoln, and Wilson 2002). For more information about the Hampden County Public Health Model for Corrections, visit <http://www.mphaweb.org/documents/PHModelforCorrectionalHealth.pdf>.

## **Resolve to Stop the Violence Project**

The Resolve to Stop the Violence Project (RSVP) has operated in San Francisco, California, since 1997. Through the program, the San Francisco Sheriff’s Department and its Post Release Educational Program partner with the community-based organization Community Works to reduce recidivism and promote client accountability among people who have a history of violence. The program emphasizes taking responsibility for one’s actions and accepting the possibility for change; identifying and analyzing the social, cultural, and personal belief systems that promote one’s violent behavior; recognizing that one has a choice at the critical time of violent response; increasing awareness of the effects of one’s behavior and empathy for victims; and preparing to take on a restorative role when back in the community.

While in custody, program participants are required to take part in an intensive jail curriculum that seeks to develop an understanding of the consequences of violence to victims and to change men’s beliefs about the male-role behavior that can lead to violence. Clients participate in a variety of classes, such as life skills, group learning, victim empathy, and restoration. Each client participates in two to three classes a day, five days a week, for a minimum of 60 days. After release, RSVP graduates join violence-prevention men’s groups, participate in education and job placement programs, and work with community and victims’ organizations to perform violence-prevention services and education. The post-release

curriculum helps clients maintain their new beliefs and behaviors, teaches them to become advocates of personal responsibility and nonviolence in their community, and provides opportunities to heal the harm they have caused.

According to a Harvard study (Gilligan and Lee 2005), RSVP clients experienced a reduction in violent rearrest rates and total rearrest rates and spent less time in custody relative to nonparticipants. The full study can be accessed online at <http://jpubhealth.oxfordjournals.org/cgi/content/abstract/27/2/143>.

### **Montgomery County Department of Corrections and Rehabilitation: Pre-Release and Reentry Services**

Since 1973, the Montgomery County Department of Corrections and Rehabilitation, the Archdiocese of Greater Washington, the Conservation Corps, and other organizations in the Washington, D.C., area have been working together to provide community residential and nonresidential alternatives to secure confinement for adult residents and to provide reentry services while maintaining community safety.

Pre-Release and Reentry Services (PRRS) operates an employment-focused, community-based correctional program in a manner that maintains the safety of the community, residents, and staff. PRRS conducts risk and needs assessments of each resident. Comprehensive case management services are provided to help facilitate successful reentry, along with ongoing assessment of the client's progress. Clients are also provided with employment and education programs. PRRS works toward increasing the resident's awareness of the impact of his or her criminality on the community and provides for community restoration.

To be eligible for PRRS, clients must be within a year of their release date. Clients must also have no history of escape (including attempts) and no serious pending criminal charges. In addition, because PRRS is a work release program, clients must have the legal right to work in the country (either through U.S. citizenship or a work visa) and be medically cleared to work before their admission to the program.

Piehl (2009) found that almost 90 percent of program participants find employment within three weeks of enrollment and that 54 percent still have the same employer two months after having left the pro-

gram. The full study can be accessed online at [http://www.manhattan-institute.org/pdf/cr\\_57.pdf](http://www.manhattan-institute.org/pdf/cr_57.pdf).

### **Boston Reentry Initiative**

Founded in 2001, the Boston Reentry Initiative (BRI) has chosen to direct social service and criminal justice resources toward clients in jail who are at a high risk of committing violent crimes upon their release. Partners include the Suffolk County Sheriff's Department, Boston Police Department, U.S. Attorney's Office, District Attorney's Office, Youth Options Unlimited, Boston Ten Point Coalition, Action for Boston Community Development, and Whittier Street Health Center.

Upon admission to jail and to the BRI, eligible clients—males between the ages of 18 and 34 who are residents of Boston and are considered to be at a high risk for continuing to engage in violent crimes—are given information about the resources available to them within the jail and in the community. Soon after admittance to the program, clients work with case-workers and faith-based mentors to develop a transition accountability plan (see box 4.2). This plan helps clients determine the services they need, such as

#### **BOX 4.2**

##### **The Faith-Based Community: Long-Standing Partners in Reentry**

Historically, faith-based organizations have played an important role in supporting individuals while they are incarcerated, as well as upon their release. Faith-based organizations continue to play an integral role in the criminal justice system. Faith-based organizations tend to have strong ties to their community and to know what resources are available and the best ways to connect to them.

The White House Office of Faith-based and Neighborhood Partnerships works to establish relationships between the federal government and faith- and neighborhood-based organizations. It manages 11 agency Centers for Faith-based and Community Initiatives, and each center forms partnerships between its home federal agency and faith-based and neighborhood organizations. To learn more about these agency centers, visit <http://www.whitehouse.gov/administration/eop/ofbnp>.

employment assistance or substance abuse treatment. Working with their mentors and caseworkers, clients seek out available services. Along with receiving these services, clients continue to meet with their mentors after their release from jail. According to a recent

study (Braga, Piehl, and Hureau 2008), participants in the BRI were 30 percent less likely to be rearrested for violent crimes than nonparticipants. The full study can be accessed online at [http://www.hks.harvard.edu/rappaport/downloads/braga\\_BRI\\_final.pdf](http://www.hks.harvard.edu/rappaport/downloads/braga_BRI_final.pdf).

# 5

## Resources for the Field

**THIS GUIDEBOOK SERVES AS A STARTING** point for developing and sustaining a partnership with your local jail. Jail reentry is a complex issue, and there are a number of organizations—including advocacy groups, research institutions, and professional associations—that provide valuable resources for developing reentry initiatives (see box 5.1). Some of these organizations are described below, and specific publications that may be helpful are listed separately.

### Organizations and Initiatives Focusing on Reentry

There are many organizations and initiatives that offer resources and support for reentry efforts, some specifically involving jails and others more general. Some of the most prominent are presented below.

#### National Reentry Resource Center

Launched in 2009, the National Reentry Resource Center, established by the Second Chance Act, provides assistance to the prisoner reentry field. Specifically, it provides education, training, and technical assistance to states, tribes, territories, local governments, service providers, nonprofit organizations, and correctional agencies working on prisoner reentry. Its web site offers extensive links and resources that address a wide range of reentry issues. For more information, visit <http://www.nationalreentryresourcecenter.org>.

### Transition from Jail to Community Initiative

The Transition from Jail to Community (TJC) initiative is a joint effort of the National Institute of Corrections and the Urban Institute. Its web site describes the TJC model and how it has been implemented in six sites and provides links to the TJC Implementation Toolkit and to other jail reentry resources. For more information, visit <http://www.jailtransition.com>.

### Jail Reentry Roundtable

The Jail Reentry Roundtable—an undertaking of the Urban Institute, John Jay College of Criminal Justice, and the Montgomery County (Maryland) Department of Correction and Rehabilitation—was held in 2006 with support from the Bureau of Justice Assistance. Several papers, presentations, and reports from the Roundtable Initiative are available at <http://www.urban.org/projects/reentry-roundtable/roundtable9.cfm>.

### Prisoner Reentry Institute, John Jay College of Criminal Justice

The web site of the Prisoner Reentry Institute (PRI) lists descriptions of the PRI's current reentry projects and provides links to reentry publications, including the National Directory of Reentry Resource Guides, a state-by-state guide to reentry resources compiled by the PRI. For more information, visit <http://www.pri.org>.

## BOX 5.1

### Funding Your Partnership

Depending on the services your partnership provides, there could be a number of funding sources available to support it. You are already aware of many funding streams for the types of services you provide to your community. If your organization is new to reentry work, however, you might know less about funding opportunities that are specifically for criminal justice-involved populations.

Information on funding opportunities is always changing, which is why it is crucial to have up-to-date information on this subject. Below are a few key resources that collect the latest information on available funding for criminal justice initiatives:

**National Reentry Resource Center** (<http://www.nationalreentryresourcecenter.org/>). The NRRC aggregates and presents information about funding opportunities for reentry efforts in a clear, comprehensive manner.

**The Report of the Re-Entry Policy Council** (<http://www.reentrypolicy.org/Report/toc>). This is a good source for guidance on funding strategies for reentry efforts. This report includes a chapter on securing funding streams for reentry initiatives with comprehensive information and suggestions.

**The Foundation Center** (<http://www.foundationcenter.org>). This web site offers a comprehensive directory of U.S. private foundations.

**Grants.gov** (<http://www.grants.gov>). Grants.gov provides comprehensive information on new federal funding opportunities. Through this site, you may also register to have daily updates sent to you by e-mail.

[jjay.cuny.edu/centers/prisoner\\_reentry\\_institute/2704.htm](http://jjay.cuny.edu/centers/prisoner_reentry_institute/2704.htm).

## Corporation for Supportive Housing

The Corporation for Supportive Housing (CSH) conducts research and advocacy on supportive housing, which is defined as permanent, low-cost housing combined with services for those who have struggled with homelessness and other problems. Supportive housing may provide an option for offenders returning to the community, and CSH offers a large selec-

tion of publications on incorporating the housing element into a reentry effort, as well as general reentry resources. These publications are accessible from CSH's web site's, <http://www.csh.org>.

## Community Oriented Correctional Health Services

Community Oriented Correctional Health Services (COCHS) is a nonprofit organization that builds partnerships between jails and community health care providers. A guidebook specific to setting up

### Client Profile: Learning to Rely on Myself

**Name:** Chrissy

**Length of stay in jail:** 6 months

**Program name:** Power Inside—Baltimore, Maryland

**How I learned about it:** I first came into contact with Power Inside through one of their street outreach teams. Then, once I was in jail, two of the staff members approached me because they recognized me from the street. They invited me to join in one of the groups. I felt comfortable because the staff members knew who I was.

**Services currently receiving:** I have used a variety of services from Power Inside, including drug treatment, court advocate, housing advocacy, case management, and the street outreach program.

**The most important thing I learned:** This program has made it easier for me to open up to others about the things I am going through. The people here are caring and truly want to help me. This program has provided me with the support I have needed, and I don't think I would be able to get it any place else. I have learned the importance of standing on my own two feet and not waiting around for someone else to do things for me. I realized that I cannot wallow in self-pity or dwell on things that I cannot change. I can only change me right now.

affiliations between health centers and local correctional facilities is available through the COCHS web site, <http://www.cochs.org>.

### **National Alliance to End Homelessness**

The National Alliance to End Homelessness (NAEH) is an organization that provides resources for understanding and developing the housing component of a reentry initiative, including overviews of homelessness among returning prisoners and descriptions of initiatives to prevent homelessness among the ex-offender population. These resources can be located by visiting <http://www.endhomelessness.org>.

### **Office of Justice Programs**

The reentry web site of the Office of Justice Programs (OJP) provides an extensive collection of links to reentry-related publications, organized by subtopic. The site also contains descriptions of OJP's multiple reentry projects and partnerships, including the Prisoner Reentry Initiative; information about reentry activities and resources in each state; links to federal agencies that offer funding for reentry initiatives; and a list of organizations that provide training and technical assistance for reentry efforts. For more information, visit <http://www.reentry.gov>.

### **National Institute of Corrections**

The reentry web page of the National Institute of Corrections (NIC) contains information on two large-scale reentry projects: the Transition from Prison to Community and Transition from Jail to Community initiatives. This page also features news articles and publications on reentry-related topics and links to other reentry project web sites. Separately, an extensive collection of reentry publications can be accessed from NIC's home page by browsing their online library and selecting reentry from the list of topics. For more information, visit <http://www.nicic.org/TPJC>.

### **Office of Faith-based and Neighborhood Partnerships**

This web site features links to 11 federal agency centers that provide guidance for faith-based and community organizations seeking to build partnerships in

a wide variety of topical areas that intersect with the jail population, including substance abuse, employment readiness, and health. The agency centers based in the U.S. Department of Labor (<http://www.dol.gov/CFBCI>) and in the U.S. Department of Health and Human Services (<http://www.hhs.gov/fbci>) are particularly relevant to reentry efforts. In addition, information about available federal funding for program activities and instructions on how to apply are also provided on the web site. For more information, visit <http://www.whitehouse.gov/administration/eop/ofbnp>.

### **Reports and Publications on Reentry**

The publications listed here constitute a solid knowledge base regarding jail reentry. All are available electronically at no cost.

- *TJC Implementation Toolkit* (Urban Institute, 2010): This web-based, interactive tool is designed to walk the reader through the design of a jail-to-community transition strategy consistent with the comprehensive Transition from Jail to Community (TJC) model. Available at <http://www.jailtransition.com/toolkit>.
- *Life After Lockup: Improving Reentry from Jail to the Community* (Urban Institute, 2008): This report integrates findings from the various efforts undertaken through the Jail Reentry Roundtable, including seven papers, a roundtable forum, and other research projects. The report provides a picture of jail reentry in America, examining opportunities, challenges, strategies, and examples of reentry initiatives. Available at <http://www.urban.org/url.cfm?ID=411660>.
- *Reentry Partnerships: A Guide for States & Faith-Based and Community Organizations* (Council of State Governments Justice Center, 2008): Designed for state and local government officials, this report provides strategies for developing a reentry partnership between criminal justice and community agencies and for making the best use of limited resources in a reentry effort. Available at [http://reentrypolicy.org/jc\\_publications/reentry\\_partnerships\\_guide](http://reentrypolicy.org/jc_publications/reentry_partnerships_guide).
- *Reentry Resource Guide* (Council of State Governments, 2009): An extensive list of helpful resources for developing offender reentry



- initiatives, organized by subtopic. Available at [http://www.reentrypolicy.org/jc\\_publications/reentry\\_resource\\_guide;file](http://www.reentrypolicy.org/jc_publications/reentry_resource_guide;file).
- *Reentry for Safer Communities: Effective County Practices in Jail to Community Transition Planning for Offenders with Mental Health and Substance Abuse Disorders* (National Association of Counties, 2008): Discusses the most effective county programs on jail reentry for offenders with mental health and substance abuse issues. Available at <http://www.ojp.usdoj.gov/newsroom/testimony/reentrysafecommunity.pdf>.
  - *The Jail Administrator's Toolkit for Reentry* (Urban Institute, 2008): A thorough and practical “how-to” guide covering each step of developing a reentry initiative, with examples of useful tools and effective strategies. Available at <http://www.urban.org/url.cfm?ID=411661>.
  - *The Report of the Re-Entry Policy Council: Charting the Safe and Successful Return of Prisoners to the Community* (Council of State Governments, 2005): Provides extensive and detailed information on the reentry transition process and effective social service provision, and offers suggestions for planning and implementing a comprehensive reentry initiative. Available at <http://www.reentrypolicy.org/Report/toc>.
  - *Sustaining Grassroots Community-Based Programs: A Toolkit for Community- and Faith-Based Service Providers* (Substance Abuse and Mental Health Services Administration, 2008): Focuses on sustaining, rather than establishing, community-based programs. Covers topics including marketing strategies, financial management, fundraising, and evaluation. Available at <http://download.ncadi.samhsa.gov/prevline/pdfs/SMA08-4340.pdf>.
  - *The Gender-Responsive Strategies Project: Jail Applications* (National Institute of Corrections, 2005): Summarizes the work on gender-responsive strategies derived from research and practice attentive to the differences between female and male offenders and discusses their application in jail settings. Available at <http://www.nicic.org/pubs/2005/020417.pdf>.
  - *Mentoring Former Prisoners: A Guide for Reentry Programs* (Public/Private Ventures, 2009): A manual drawing on the experience of 11 sites that were involved in the Ready4Work prisoner reentry demonstration, as well as best practices in the mentoring field. It provides guidelines for those interested in developing a mentoring program to support former prisoners. Available at [http://www.ppv.org/ppv/publication.asp?section\\_id=22&search\\_id=&publication\\_id=316](http://www.ppv.org/ppv/publication.asp?section_id=22&search_id=&publication_id=316).
  - *Decriminalizing Mental Illness: Background and Recommendations* (National Alliance on Mental Illness, 2008): Outlines strategies for integrating mental health services with the justice system and for diverting offenders suffering from mental illness away from jail. Available at [http://www.nami.org/Template.cfm?Section=Issue\\_Spotlights&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=5&ContentID=21046](http://www.nami.org/Template.cfm?Section=Issue_Spotlights&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=5&ContentID=21046).
  - *A Best Practice Approach to Community Re-entry from Jails for Inmates with Co-occurring Disorders: The APIC Model* (National GAINS Center, 2002): Outlines the APIC—Assess, Plan, Identify, Coordinate—model for improving the reentry of jail inmates suffering from co-occurring disorders. Available at <http://www.gainscenter.samhsa.gov/pdfs/reentry/apic.pdf>.
  - *Getting Out with Nowhere to Go: The Case for Re-Entry Supportive Housing* (Corporation for Supportive Housing, 2008): Provides a brief introduction to the issue of housing in reentry efforts and looks at a few successful reentry housing programs that have been implemented in cities across the country. Available at <http://www.csh.org/document/docWindow.cfm?fuseaction=document.viewDocument&documentid=1105&documentFormatId=2955>.
  - *Transitional Jobs: A Workforce Strategy for Cities* (National League of Cities, 2006): While not focused specifically on jail reentry, this report describes how to use transitional job programs to provide work for those with barriers to employment, including ex-offenders. Also available from this web page is the transcript from a 2007 National League of Cities audio-conference on helping ex-offenders gain employment, called “Banning the Box: Facilitating the Reentry of Former Offenders into the Workforce and Community.” Available at <http://www.nlc.org/IYEF/fes/jobs/resources.aspx#publication>.



## Conclusion

**THIS GUIDEBOOK IS MEANT TO HELP** you and your organization establish a strong and lasting partnership with your local jail. While you may face challenges, this type of partnership can provide a great benefit to your community and to the individuals returning from jail. Not only will the partnership help you and the jail achieve your respective missions by creating a safer and healthier community, but it will also provide access to services for inmates and returning inmates—many of whom might not have received these important services otherwise. Ultimately, working together with the jail will allow you to improve and expand the reach of your service delivery model. This partnership can also benefit local communities by fostering a more targeted use of existing resources, as well as providing new resources. And during an era of fiscal challenges,

it is important to support initiatives that improve overall outcomes and reduce costs.

Reentry is a community responsibility. As part of the community, your organization can play a key role in changing the lives of individuals who are returning home from jail. As you work with your local jail, keep in mind the six steps discussed in this document, and adapt, edit, and revise them to make them your own. While the material discussed here might not address every issue that may arise, it will help guide you through the process. Keep in mind as well the importance of mutual respect and effective communication. While you might be approaching reentry from different ends of the spectrum, both your organization and your local jail have the same goal: you both want to help individuals succeed upon release and see your community thrive.

## APPENDIX

# 1

## Sample Documents

**APPENDIX 1 INCLUDES SAMPLE DOCUMENTS** you might find helpful as you begin to establish your partnership with your local jail. As discussed in chapter 2, some agencies and organizations choose to create MOUs when outlining the roles and expectations of each partner. MOUs formalize a partnership. Because they range in complexity, two examples are provided—a simpler version and a more comprehensive version. The type of MOU you develop will depend on your organization's and your partner's requirements.

In addition to sample MOUs, this appendix includes two examples of confidentiality waivers. A

similar form will likely be needed for you and your partners to be able to share information about your clients.

### *Contents*

- Sullivan County, New Hampshire, Memorandum of Understanding
- Santa Barbara County, California, Memorandum of Understanding
- Douglas County, Kansas, Jail Release of Protected Health Information
- Bert Nash Community Mental Health Center Release of Protected Health Information

*Memorandum of Understanding: Sullivan County, NH*

**MEMORANDUM OF UNDERSTANDING**

This memorandum of understanding sets out the responsibilities of the collaborative relationship between the Sullivan County Department of Corrections and West Central Services Inc. The goal of this agreement is to work collaboratively to improve services for offenders being released from the Sullivan County Department of Corrections. The Sullivan County Department of Corrections and West Central Services Inc. agree to the following:

**The Sullivan County Department of Corrections will:**

- Identify and refer inmates transitioning from the Department of Corrections to the West Central Services Inc. program
- Provide a release plan for the inmates entering the Community
- Maintain regular contact with the staff from West Central Services Inc.
- Provide opportunities for West Central Services Inc. staff to discuss the program with staff and inmate populations
- Work with parole and other releasing authorities to provide for placement as a condition of release
- Work with West Central Services Inc. to identify and apply for grant funding to enhance program operations

**West Central Services Inc. will:**

- Provide transitional treatment services to inmates transitioning into the community
- Accept Sullivan County referrals into the West Central Services Inc. program when possible (it is understood that clients without insurance may not be accepted)
- Provide regular referral for treatment services based on the Sullivan County release plan
- Maintain regular contact with the Sullivan County Department of Corrections regarding the status of clients
- Work with and support the Sullivan County Department of Corrections on any grant applications that are mutually beneficial to both agencies

The Sullivan County Department of Corrections

Signed by: \_\_\_\_\_  
Name Title Date

West Central Services Inc.

Signed by: \_\_\_\_\_  
Name Title Date

**MEMORANDUM OF UNDERSTANDING  
FOR THE COUNTY OF SANTA BARBARA  
BETWEEN  
THE DEPARTMENT OF ALCOHOL, DRUG & MENTAL HEALTH SERVICES  
AND  
THE SHERIFF'S DEPARTMENT**

***SECTION 1. PURPOSE***

This Memorandum of Understanding (hereafter "MOU") is hereby entered into between the County of Santa Barbara Department of Alcohol, Drug, and Mental Health Services (hereafter "ADMHS") and the County of Santa Barbara Sheriff's Department (hereafter "Sheriff"). The purpose of this MOU is to:

1. Describe services to be rendered by the Sheriff's Treatment Program (STP) to ADMHS relative to the Negotiated Net Amount (NNA) treatment services as funded and administered by the California Department of Alcohol and Drug Programs.
2. Describe mental health services rendered to jail inmates by Sheriff's contracted provider.
3. Describe procedures and define responsibilities for the transfer and care of inmates taken to the Psychiatric Health Facility (PHF).

***SECTION 2. PROGRAM DESCRIPTION***

***A. STP***

1. Sheriff shall provide NNA Outpatient Drug Free-Model (ODF) counseling, consisting of individual and group treatment services for men and women in the Santa Barbara County Jail who have a history of substance abuse, as described in Exhibit A. These services will be in coordination and collaboration with ADMHS, the Probation Department, the Santa Barbara Courts, and other community-based organizations.
2. Specific services provided by STP will conform to California Department of Alcohol and Drug Programs guidelines.
3. ADMHS will provide local project administration and fiscal oversight for the STP, and will provide direction with respect to collection of any required program data.

***B. PSYCHIATRIC HEALTH FACILITY SERVICES TO INMATES***

1. Sheriff has entered into a contract with Prison Health Systems (hereafter "PHS"), to provide mental health services to inmates in the Santa Barbara County Jail. Sheriff shall be responsible to ensure that PHS complies with the terms outlined in this MOU.
2. Prior to an inmate being admitted to PHF from jail custody, Sheriff and ADMHS must determine which agency is fiscally responsible, taking into account the inmate's custody status.
3. PHS shall identify inmates with suspected psychiatric emergencies that might require involuntary psychiatric admission to the PHF pursuant to Welfare and Institutions Code (WIC) §5150 and contact the designated ADMHS staff (hereafter "CARES Mobile Crisis") to arrange for an assessment.
4. ADMHS CARES Mobile Crisis shall respond and provide emergency mental health evaluation 24 hours per day, 7 days per week. For inmates experiencing psychiatric emergencies, CARES Mobile Crisis will consult with the ADMHS CARES psychiatrist or On-call Psychiatrist to review the inmate's condition and to determine the inmate's need for hospitalization, pursuant to WIC §5150.

5. For inmates needing hospitalization pursuant to WIC §5150, CARES Mobile Crisis staff will contact PHF and facilitate transfer to the PHF if a bed is available at the time of assessment. In the event no beds are available, PHF will place a hold on a bed so that an inmate transfer can occur when a bed becomes available. PHF will notify CARES Mobile Crisis once a PHF bed becomes available. Because inmates' needs for involuntary interventions change over time, CARES Mobile Crisis in concert with PHF staff will determine whether the inmate needs to be reassessed prior to transfer.
6. Sheriff shall transport inmates needing psychiatric hospitalization per WIC §5150, as determined by ADMHS, to the PHF. Sheriff staff will provide transportation to court, at no additional cost, for PHF clients who may be at risk for dangerous behavior that cannot be managed by ADMHS staff. ADMHS staff should provide twenty-four (24) hour notice to the Transportation Unit for these requests.
7. PHF will provide acute psychiatric inpatient hospital services to inmates, including routine services and hospital-based ancillary services.
  - a. "Routine Services" means bed, board and all medical, nursing and other support services usually provided to an inpatient by a psychiatric inpatient hospital. Routine services do not include hospital-based ancillary services or physician or psychologist services.
  - b. "Hospital-Based Ancillary Services" means services which are received by a beneficiary admitted to a psychiatric inpatient hospital, other than routine services.
8. Inmates taken to the PHF from the jail pursuant to Penal Code Section 4011.6, who remain in PHF in excess of seventy-two (72) hours, will have their continued need for placement at PHF reviewed daily by ADMHS' treating Psychiatrist. The Jail Commander and PHF Program Manager, or their designees, will be notified daily via e-mail, regarding the status of each inmate.
9. PHS shall assign a primary contact, who shall be a member of PHS' Mental Health staff, to serve as liaison to ADMHS ensure continuity of care for ADMHS clients and other inmates with mental health conditions.
10. PHF Staff and PHS Mental Health staff shall meet regularly to identify and develop solutions regarding inmate mental health care, continuity of care for individuals, and clinically relevant gaps in service. ADMHS staff shall attend monthly MAC meetings.

### ***SECTION 3. INMATE MENTAL HEALTH SERVICES IN JAIL***

- A. Through the Sheriff's contract with PHS, Sheriff shall ensure that PHS provides mental health services to inmates in a manner that ensures continuity of care while they are in custody and post-release.
- B. At inmate intake, Sheriff staff will provide an initial intake screening of all. Inmates who are identified as having mental health needs shall be referred to PHS' mental health clinician for further evaluation.
- C. As described in the Sheriff's contract with PHS, within 14 days of admission, PHS staff will perform a detailed history and physical examination, which will include a mental health evaluation.
- D. Identification of ADMHS Clients.
  1. Daily, Sheriff staff will provide the jail's 24 hour booking and release roster to ADMHS PHF staff via fax.
  2. PHF staff will review the roster and identify the individuals who have an open case (episode) with ADMHS (hereafter "clients"). For each ADMHS client on the roster, PHF staff will provide PHS with contact information for ADMHS staff responsible for providing client information (hereafter "ADMHS Jail Liaison").
  3. Within 24 hours of an inmate being identified by PHF as an ADMHS client, PHS staff will contact the ADMHS Jail Liaison for consultation on relevant treatment history. The ADMHS Jail

- Liaison will provide record of the most recent assessment performed by ADMHS psychiatrist, psychosocial assessment and medication sheet.
4. Medication.
    - a. The client's ADMHS Jail Liaison will provide information regarding up to date psychopharmacological treatment including:
      - i. Medication name and dosage.
      - ii. Client's history of medication response and compliance.
      - iii. If clinically indicated by PHS' mental health evaluation, PHS shall continue the ADMHS client's existing prescribed psychotropic medications until consultation with PHS' psychiatrist.
    - b. Once a complete psychiatric evaluation is performed by the PHS psychiatrist, PHS shall consult with the ADMHS treating psychiatrist regarding the client's existing psychotropic medication treatment.
  - E. Discharge Planning.
    - A. Sheriff will ensure that PHS provides clinically appropriate discharge planning for inmates with mental health conditions. PHS will facilitate, during incarceration and upon notification from the Sheriff of a pending release, continuity of care from the jail into the community.
    - B. PHS' discharge planning protocol shall ensure that all inmates with mental health conditions receive a three (3) day supply and a prescription for a 30 day supply of discharge medications and instruction on medication management prior to discharge.
    - C. ADMHS Clients. For inmates who are ADMHS clients, PHS' Discharge Planner shall refer the client to their assigned ADMHS Jail Liaison who shall be responsible for coordinating all necessary referrals for mental health services upon release from jail.
    - D. Other Santa Barbara County Residents. The following shall apply to all other inmates who are residents of Santa Barbara County but do not have a case file (episode) open with ADMHS:
      - a. Inmates who are Medi-Cal eligible or indigent and are diagnosed as having a severe mental illness, or are Medi-Cal beneficiaries with specialty mental health needs, shall be referred by PHS to ADMHS CARES North or South facility.
    - E. All Other Inmates. All other inmates not meeting the criteria of Sections 3.E.3 and 3.E.4. shall be referred by PHS to appropriate community resources, such as their primary care provider.

#### **SECTION 4. FINANCIAL PROVISIONS**

##### **A. STP**

*The contract maximum for STP for FY 2009-10 will be \$69,601. For future fiscal years, the amount will be determined by the ADMHS adopted budget. The total costs charged to ADMHS by STP will not exceed this amount.*

1. Sheriff will:
  - a. Submit, on a monthly basis, an electronic invoice for reimbursement of STP. STP salary costs will be supported by County Financial Information Network (FIN) productive labor reports and provided to ADMHS.
  - b. Furnish ADMHS such financial information necessary to determine the reasonable value of the services rendered, as described in Exhibit A.
2. ADMHS will:
  - a. Reimburse STP monthly based on actual costs. In no event will the total of monthly reimbursements exceed the fiscal year maximum.
  - b. Evaluate monthly the electronic invoice submitted by STP. If the cost for the service performed is determined to be satisfactory, payment processing will be initiated. In no event will service units (staff hour) from one month be shifted, added to, or included with another monthly invoice.

- c. Pay the monthly invoice for satisfactory work within thirty (30) days of submission. Any invoice that has errors or omissions will be immediately returned to Sheriff's Department for correction and resubmission.
3. Failure of ADMHS to discover or object to any unsatisfactory work or billings, prior to payment, will not constitute a waiver of ADMHS' right to require the work or billing to be corrected.

**B. PSYCHIATRIC HEALTH FACILITY**

1. The PHF daily bed rate will be established by the ADMHS Published Charges as approved by the Board of Supervisors. ADMHS will notify Sheriff of proposed modifications to ADMHS' Published Charges that impact the PHF daily bed and will, to the best of its ability, estimate the financial impact to the Sheriff of such changes to the PHF daily bed rate.
2. The anticipated number of PHF bed days utilized by inmates is 330 annually. Sheriff will be fiscally responsible for costs exceeding the anticipated total fiscal year PHF bed days, as long as the inmate/patient fiscal responsibility lies with Sheriff.
3. Sheriff will reimburse ADMHS for PHF bed days utilized by inmates over 72 hours when there is a psychiatrist certification, or a court order authorizing continued retention or approval by the Jail Commander/ designee.
4. Sheriff will not be fiscally responsible for inmates transferred and housed at PHF under Penal Code Section 1370.01 and 1367.1.
5. In order for twelve (12) months of actual costs to be posted by Journal Entry (JE) to the County's Financial Information System (FIN) before the end of any County fiscal year, services described in this MOU will consist of actual services delivered between, and including, the months of June through May of each Fiscal Year.
6. When Sheriff is fiscally responsible for PHF services, the following procedures will apply:
  - a. ADMHS will bill Sheriff for actual total gross charges with appropriate back-up documentation that includes, but is not limited to: a listing of inmates referred, the date of admission to the PHF.
  - b. Sheriff accounting staff will review all billings and communicate any potential errors to ADMHS accounting staff prior to processing payment. Should the account be audited, Sheriff and ADMHS staff, through the journal entry process, will process any adjusting errors.
  - c. Actual charges for services will be billed on an annual basis through an on-line Auditor-Controller Journal Entry (JE) by the 15th day of the last month in which services are delivered in any fiscal year.

**SECTION 5. DISPUTE RESOLUTION**

- A. Any dispute/disagreement between the two departments arising from this MOU will first be addressed and resolved at the lowest possible staff level between the appropriate departmental representatives.
- B. If the issue is accounting or administrative in nature, the respective accounting staff, who processes the routine paperwork, should first address it. If the matter is not resolved at that level, it may be referred to the respective Financial Managers; then to the Assistant Director for Administration of ADMHS or a designee and Chief or Commander of Custody Operations prior to an ultimate resolution by the respective Department Heads or designated representatives.
- C. If the issue is operational in nature the respective line staff who oversees the day-to-day operations should address it prior to any referrals to Program Managers and the Chief and/or Commander or respective department heads or designees.



- D. Should either ADMHS or Sheriff desire to revise or add any significant provisions to this MOU, such change will be made a part of this MOU by written amendment, approved in writing by the authorized representatives of both departments.

#### ***SECTION 6. POINTS OF CONTACT***

- A. ADMHS - The primary contacts for ADMHS shall be the Interim PHF Manager for any PHF related matters; the CARES Manager for any WIC §5150 or discharge related matters; or other ADMHS staff as delegated by ADMHS' Medical Director.
- B. Sheriff - The Commander of the Jail, and in his/her absence, the Main Jail Administrative Lieutenant, will serve as the primary contact.

#### ***SECTION 7. TERMS***

- A. The term of this agreement is effective July 1, 2009, and shall continue in effect for subsequent fiscal years until terminated or amended. The amounts in this MOU are informational only. The official annual fiscal year budget amounts for the services described in this MOU shall be represented by the Santa Barbara County budget development system "Service Change Request Forms" agreed to by both departments and made a part of the County Adopted Budget for each respective fiscal year.
- B. This agreement may only be modified via an amendment signed by both parties.
- C. Either party may cancel or amend this agreement with ninety (90) days written notice.
- D. A new MOU may be negotiated such that it supersedes the existing MOU when signed by both designated representatives.
- E. Both parties understand that this is not an exclusive MOU and that either party has the right to negotiate with and enter into contracts or agreements with others to provide and/or receive the same or similar services.
- F. ADMHS agrees not to assign nor transfer any of its obligations under this MOU without the prior written consent of Sheriff. Sheriff agrees not to assign nor transfer any of its obligations under this MOU without the prior written consent of ADMHS.
- G. If any one or more provisions contained in this MOU will for any reason be held to be invalid, illegal, or unenforceable in any respect, then such provision or provisions will be deemed severable from the remaining provisions herein, and such invalidity, illegality, or unenforceability will not affect any other provision herein.

DATED \_\_\_\_\_

DATED \_\_\_\_\_

SANTA BARBARA COUNTY ALCOHOL,  
DRUG, & MENTAL HEALTH SERVICES

SANTA BARBARA COUNTY SHERIFF'S  
DEPARTMENT

\_\_\_\_\_

Director

Alcohol, Drug & Mental Health Services

\_\_\_\_\_

Sheriff

Sheriff's Department

*Release of Information: Douglas County, KS, Jail*

**DOUGLAS COUNTY JAIL**

**AUTHORIZATION FOR DISCLOSURE AND RELEASE**

**OF PROTECTED HEALTH INFORMATION**

PATIENT'S NAME:  ALIAS:	BIRTH DATE:	SOCIAL SECURITY NUMBER:
ADDRESS:		CHN NUMBER:
<p><u>AUTHORIZATION:</u></p> <p>I hereby authorize and request _____ and its employees and representatives (collectively the "Provider") to disclose my PHI to the Douglas County Jail Health Care Services and the Douglas County Sheriff's Office (the "<u>Douglas County Jail Medical Unit</u>"), whose address is 3601 E. 25<sup>th</sup> St, Lawrence, KS 66046, and fax number is (785) 830-1084.</p> <p>For dates of _____ through _____ (<i>insert dates of permitted disclosure</i>). If the first date is left blank, this authorization shall apply to the first date for which the Provider has medical information relating to me. If the second date is left blank, this authorization shall apply to the date that it is received.</p>		
<p><u>PURPOSE:</u></p> <p>The purpose of the authorization and the requested disclosure is to assist the Douglas County Jail Medical Unit in providing me with appropriate medical treatment.</p>		
<p><u>INFORMATION TO BE DISCLOSED:</u></p> <p>Any and all protected health information that the Douglas County Jail Medical Unit may require ("PHI"), including, but not limited to, my entire medical record and/or chart (<i>cover to cover</i>), discharge summaries, histories and physicals, consultations, progress notes, physician</p>		

orders, operative reports, anesthesia records, emergency room records, laboratory reports, radiological films and reports, rehabilitation records, diagnostic testing strips and results, nursing notes, prescriptions, medication and pharmaceutical records, any and all records received from other health care providers, and any correspondence contained in or related to my medical chart. Information is expressly permitted to be disclosed in writing (including facsimiles) or orally.

By signing this authorization, I specifically consent to the release of records containing information about alcohol or drug abuse, psychiatric treatment, mental status, HIV testing or results, AIDS information, and additional information concerning communicable diseases, including but are not limited to, hepatitis and venereal diseases, such as syphilis and gonorrhea.

**DURATION OF AUTHORIZATION AND REVOCATION:**

This authorization shall remain in effect until \_\_\_\_\_ (*insert termination date*). If left blank, this authorization shall remain in effect until the Provider has knowledge that I have been released from the Douglas County Jail, but no later than one year from the date listed below.

Notwithstanding the foregoing, I may revoke this authorization at any time (except to the extent that action has been taken in reliance upon it) by mailing or hand-delivering written revocation to the Provider.

I understand that treatment is not conditioned upon my execution of this authorization. I understand that if the person or entity that receives the information is not a health care provider or health plan covered by federal privacy regulations, there is the potential that the information described above may be re-disclosed and no longer protected by the federal privacy regulations.

A photocopy (including a fax or e-mail) of this authorization shall be as effective and as valid as the original.

I acknowledge that the Douglas County Medical Unit has provided me with a signed copy of this authorization.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Patient*



- |                          |                          |  |                          |                          |  |
|--------------------------|--------------------------|--|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Treatment Plan   | <input type="checkbox"/> | <input type="checkbox"/> | Physician's orders   |
| <input type="checkbox"/> | <input type="checkbox"/> | Diagnosis, brief description of progress and Prognosis | <input type="checkbox"/> | <input type="checkbox"/> | Labs, EKG  |
| <input type="checkbox"/> | <input type="checkbox"/> | Psychological tests or projective assessment           | <input type="checkbox"/> | <input type="checkbox"/> | Medical discharge summary  |
| <input type="checkbox"/> | <input type="checkbox"/> | Progress Notes, including therapy notes                | <input type="checkbox"/> | <input type="checkbox"/> | Crisis Screening report  |
| <input type="checkbox"/> | <input type="checkbox"/> | Legal Information                                      | <input type="checkbox"/> | <input type="checkbox"/> | Custody Evaluation   |
| <input type="checkbox"/> | <input type="checkbox"/> | Evaluations  | <input type="checkbox"/> | <input type="checkbox"/> | Educational records including achievements and assessments (IBP, information, discipline records, school attendance) |
| <input type="checkbox"/> | <input type="checkbox"/> | Substance abuse information                            | <input type="checkbox"/> | <input type="checkbox"/> | HIV/AIDS status  |
| <input type="checkbox"/> | <input type="checkbox"/> | Scheduling   |                          |                          |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Billing/Financial                                      | <input type="checkbox"/> | <input type="checkbox"/> |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Other:   |                          |                          |  |

**Information is Needed for the Following Purposes:**

- To provide ongoing treatment/continuity of care
- To provide educational services/school placement or assessment/coordination of services with authorized school officials
- Legal Proceedings
- Disability Determination
- To coordinate treatment efforts with my family/concerned person
- To coordinate treatment and continuing care efforts with my employer
- To enable judges, attorneys, probation/parole officers to support treatment goals or make legal decisions on my behalf (Diversion, Probation, Parole)
- Other: \_\_\_\_\_

**READ CAREFULLY: I understand that my medical/behavioral health records are confidential and that the Bert Nash Center cannot condition treatment based on the willingness or refusal to sign authorizations. I further understand that by signing this authorization, I am allowing:**

- Release of information to the agency or person specified above including any drug and/or alcohol information (Drug and/or alcohol abuse information records are specifically protected by federal regulations) (42CFR Part 2)

- Federal Regulations prohibit the recipient of the information from making further disclosure without the specific, written consent of the responsible person, or as otherwise permitted by law or regulation. A general authorization for the release of medical or other information is not sufficient for this purpose. In the event that the person/entity who receives this information is not covered by the federal privacy regulations the information described above may be re-disclosed and no longer protected by the federal regulations.
- This consent may be revoked at any time except to the extent that action has already been taken. This authorization will expire on \_\_\_\_\_. If left blank, this authorization automatically expires 90 days after discharge.
- This authorization to release information is subject to the following restrictions: \_\_\_\_\_  
\_\_\_\_\_

_____		_____
Signature of Client		Date
_____	_____	_____
Signature of Parent, Guardian, or Legal Representative	Relationship	Date
_____		_____
Signature of Witness		Date

## Partnership Profiles

**THE FOLLOWING IS A LIST OF CBO/JAIL** partnerships we consulted during the process of writing this guidebook. The partnerships described below illustrate the variety of services available to clients leaving jail and returning to the community throughout the United States. This is not a comprehensive list of the jail reentry partnerships that exist. If you or someone at your organization knows of existing partnerships in or near your community, we encourage you to reach out to them, in addition to the partnerships described below, if you need guidance along the way.

### **Being Empowered and Safe Together (BEST) Program: Maui Community Correctional Center**

1. Location: Maui, Hawaii
2. Funding Source: U.S. Department of Justice, Serious and Violent Offender Reentry Initiative Grant (Going Home Project), the State of Hawaii, the County of Maui, Hawaii Community Foundation, the Office of Hawaiian Affairs, and private grants and donors.
3. Population Serving: Individuals between the ages of 18 and 35 who committed a Class A or B felony and are serving a sentence of one year or more.
4. Partnership Goal: Assist clients in their reentry by providing mental health counseling, substance abuse treatment, housing assistance, employment services, family reunification services, and a variety of support services or referrals. Clients also participate in a cultural renewal program.

### 5. Contact Information:

Ken Hunt  
 Director  
 Being Empowered and Safe Together  
 99 Mahalani Street  
 Wailuku, HI 96793  
 Phone: 808-249-2990

### **Bert Nash Community Mental Health Center: Douglas County Sheriff's Office**

1. Location: Lawrence, Kansas
2. Funding Source: Douglas County Sheriff's Office
3. Population Serving: Clients who are at risk of suicide and clients in need of mental health assistance.
4. Partnership Goal: Create continuity of care and treatment for clients receiving mental health services by providing mental health treatment while in jail and once released from jail. Some of the mental health services conducted include dialectical behavioral therapy, cognitive behavioral therapy classes, and suicide assessment and prevention.
5. Contact Information:  
 Sharon Zehr, LCSW  
 Mental Health Coordinator  
 Bert Nash Community Mental Health Center  
 200 Maine Street  
 Lawrence, KS 66044  
 Phone: 785-830-1021



### **Corporation for Justice Management: Hampden County Sheriff's Department**

1. Location: Springfield, Massachusetts
2. Funding Source: Byrne Grant and Hampden County Sheriff's Department
3. Population Serving: Clients must have a substance abuse addiction or be recovering from a substance abuse addiction. Clients cannot have been convicted of a sex offense or have a history of serious or violent crimes.
4. Partnership Goal: Provide a 50-bed sober transitional housing program with case management services linking program participants to employment readiness and placement, drug treatment, and referrals to other services.
5. Contact Information:  
Lorraine Montalto  
Vice President of Treatment Services and Criminal Justice  
Corporation for Justice Management  
11-13 Hampden Street  
Springfield, MA 01103

### **DCCCA, Inc.: Douglas County Sheriff's Office**

1. Location: Lawrence, Kansas
2. Population Serving: Clients with a substance abuse or alcohol addiction.
3. Partnership Goal: Provide alcohol and substance abuse treatment services to clients upon their release from jail. Treatment is conducted in the form of cognitive-behavioral therapy along with 12-step group programs.
4. Contact Information:  
Denise Darby-Haynes  
Interim Director of Outpatient Services  
DCCCA  
1739 E. 23rd Street  
Lawrence, KS 66046  
Phone: 785-830-8238

### **Denver Works: Denver County Sheriff's Office**

1. Location: Denver, Colorado
2. Funding Source: Foundations and various city and county grants.

3. Population Serving: Clients with employment assistance needs.
4. Partnership Goal: Provide a variety of employment services to clients who have recently been released from jail. Some of the services provided include job training, clothing for interviews, mentoring opportunities, and computer lab assistance. Although Denver Works is an employment-focused program, it also provides substance abuse vouchers to those in need of treatment services and domestic violence classes.
5. Contact Information:  
Nadine Kerstetter  
Client Manager  
Denver Works  
2828 N. Speer Blvd. #103  
Denver, CO 80211  
Phone: 720-865-2332

### **Drug Abuse Foundation of Palm Beach County: Palm Beach County Jail**

1. Location: Delray Beach, Florida
2. Population Serving: Clients with substance abuse addictions.
3. Partnership Goal: Provide substance abuse treatment to clients who are currently incarcerated. Services provided include residential treatment, detox/medical services, outpatient treatment, and case management.
4. Contact Information:  
Nick Casamassimo  
Director of Facilitation Services  
Drug Abuse Foundation of Palm Beach County  
400 South Swinton Avenue  
Delray Beach, FL 33444  
Phone: 561-278-0000

### **Empowerment Program: Denver County Sheriff's Office**

1. Location: Denver, Colorado
2. Population Serving: Due to the wide variety of services offered, there are no specific qualifying criteria.
3. Partnership Goal: To assist clients with their transition from jail to the community by offering a variety of services in jail and in the commu-

nity. The Empowerment Program conducts group sessions for clients while they are incarcerated. Group sessions include substance abuse education, parenting classes, Seeking Safety and trauma classes, and pre-drug treatment education. Once clients are released from jail, they can receive drug treatment services, educational assistance, employment assistance, housing referrals, and case management services in the community.

4. Contact Information:

Carol Lease  
Executive Director  
Empowerment Program  
1600 York Street, Suite 201  
Denver, CO 80206  
Phone: 303-320-1989

### **Lawrence Community Shelter: Douglas County Sheriff's Office**

1. Location: Lawrence, Kansas
2. Funding Source: City and federal grants, private donations
3. Population Serving: Individuals must be homeless; however, there are no requirements pertaining to type of offense, gender, or age.
4. Partnership Goal: Provide housing services to clients being released from jail. Outreach workers work closely with clients while they are incarcerated to determine their needs and ensure that they receive proper services upon their release.
5. Contact Information:  
Loring Henderson  
Executive Director  
Lawrence Community Shelter  
214 W 10th Street  
Lawrence, KS 66044  
Phone: 785-832-8864

### **Lawrence-Douglas County Housing Authority (LDCHA): Douglas County Sheriff's Office**

1. Location: Lawrence, Kansas
2. Population Serving: Clients who have lost their housing but are not considered chronically homeless.
3. Partnership Goal: Provide housing vouchers to individuals who are homeless upon their release from jail. LDCHA's program, E-housing Con-

nection, provides emergency relief for individuals who have lost their housing for various reasons. As part of E-housing Connection, individuals are provided with transitional housing for three to six months while waiting for permanent housing. This program also requires each participant to maintain follow-up case management services.

4. Contact Information:

Barbara Huppee  
Director  
Lawrence-Douglas County Housing Authority  
1600 Haskell Avenue  
Lawrence, KS 66044  
Phone: 785-842-8110

### **Power Inside: Maryland Correctional Institute for Women (MCIW) and the Women's Detention Center**

1. Location: Baltimore, Maryland
2. Funding Source: Baltimore City Department of Homeless Services, state grants, private foundations, and private donations.
3. Population Serving: Women.
4. Partnership Goal: Improve the continuity of care of services women receive when transitioning from jail to the community. Power Inside conducts group sessions for women while they are at MCIW and the Women's Detention Center. After the women are released, Power Inside provides case management services in the areas of substance abuse, housing, employment, and medical services.
5. Contact Information:  
Jacqueline Robarge  
Director  
Power Inside  
325 E. 25th Street  
Baltimore, MD 21218  
Phone: 410-889-8333

### **Prodigal Ministries, Inc.: Louisville Metro Department of Corrections**

1. Location: Crestwood, Kentucky
2. Funding Source: Primarily private donations and fundraisers; some funding through federal, state, and local grants.

3. Population Serving: Anyone released from jail or prison, except those who have a sex offense or an arson conviction.
4. Partnership Goal: Provide assistance for clients in transition from jail to community. Prodigal Ministries provides aftercare services in a residential living facility for men and women who were recently released from jail and prison. Some of the services include 12-step programs, counseling, job training, educational training, and a variety of support services.
5. Contact Information:  
Tom Mugavin  
Community Director  
Prodigal Ministries, Inc.  
P.O. Box 1484  
Crestwood, KY 40014  
Phone: 502-588-9096

### **San Mateo County's Behavioral Health and Recovery Services: San Mateo County's Sheriff's Office**

1. Location: San Mateo County, California
2. Funding Source: County funding; pending grant from the U.S. Department of Justice, Bureau of Justice Assistance; State of California; and a Federal Substance Abuse Block Grant.
3. Population Serving: Individuals who score medium to moderate on a risk assessment, or any individual the health staff views as having a substance abuse and mental health illness.
4. Partnership Goal: The partnership is based on the motto, "Getting Ready, Going Home, Staying Home."
  - Getting Ready: Provide a risk and needs assessment of each client, create a formalized plan and discharge information, and match clients to better services based on their risk and needs assessment.
  - Going Home: Engage clients while still in jail to determine what services the client needs and to establish key contacts that would be helpful for the client.
  - Staying Home: Implement the discharge plan by placing the individual in the proper services—such as treatment facilities, transitional housing, or employment services—

that will help the individual be successful in remaining in the community.

5. Contact Information:  
Stephen Kaplan  
Director of Substance Abuse and Alcohol Services  
San Mateo County  
Behavioral Health and Recovery Services  
225 37th Avenue  
San Mateo, CA 94403  
Phone: 650-573-3609

### **Spokane Housing Authority: Washington State Department of Corrections**

1. Location: Spokane, Washington
2. Funding Source: Washington State Government.
3. Population Serving: Individuals being released from jail who do not have housing, specifically those facing housing challenges, including individuals convicted of sex offenses and violent crimes.
4. Partnership Goal: Assist individuals who are in need of housing and other services upon their release from jail. This program helps clients find housing prior to their release. Additionally, this program connects individuals with Goodwill and the Spokane Neighborhood Assistance Program (SNAP). Through Goodwill, clients are able to access job training. SNAP provides clients with additional social services.
5. Contact Information:  
Mary Jo Braaten  
Director of Assisted Housing  
Spokane Housing Authority  
55 W. Mission Avenue, #104  
Spokane, WA 99201  
Phone: 509-252-7108

### **St. Francis House: All County Houses of Corrections in Massachusetts**

1. Location: Boston, Massachusetts
2. Funding Source: Housing and Urban Development grants, Massachusetts Parole Board, U.S. Probation, Oak Foundation Grant, and private donations.
3. Population Serving: There are no specific qualifying criteria.

4. Partnership Goal: Create a fluid transition from jail to the community by providing aftercare services to clients who are being released from the local jail. St. Francis House also helps clients establish stable housing and provides a variety of basic services, including counseling, rehabilitation services, and educational assistance.

5. Contact Information:

Fred Smith  
Director of Program Development, Research,  
and Evaluation  
St. Francis House  
39 Boylston Street  
Boston, MA 02116  
Phone: 617-654-1241

**West Central Behavioral Health:  
Sullivan County Department  
of Corrections**

1. Location: Lebanon and Claremont,  
New Hampshire

2. Funding Source: Private donations and a Substance Abuse and Mental Health Services Administration (SAMHSA) grant.

3. Population Serving: While there are no criteria for providing services based on gender, age, or crimes committed (past or present), clients must have a behavioral or mental health problem/illness.

4. Partnership Goal: Provide a variety of mental health services to clients to improve their quality of life. The services provided include counseling, medication management, suicide prevention, and case management.

5. Contact Information:

Suellen M. Griffin  
President  
West Central Behavioral Health  
9 Hanover Street, Suite 2  
Lebanon, NH 03766  
Phone: 603-448-0126



## References

- Beck, Allen J. 2006. "The Importance of Successful Reentry to Jail Population Growth." Paper presented at the Urban Institute Jail Reentry Roundtable, Washington, DC, June 27, 2006. <http://www.urban.org/projects/reentry-roundtable/upload/beck.PPT>.
- Beck, Allen J., and Jennifer C. Karberg. 2001. *Prison and Jail Inmates at Midyear 2000*. NCJ 185989. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=874>.
- Bogue, Brad, Nancy Campbell, Mark Carey, Elyse Clawson, Dot Faust, Kate Florio, Lore Joplin, George Keiser, Billy Wasson, and William Woodward. 2004. *Implementing Evidence-Based Practice in Community Corrections: The Principles of Effective Intervention*. Washington, DC: National Institute of Corrections. <http://nicic.gov/Library/019342>.
- Braga, Anthony A., Anne M. Piehl, and David Hureau. 2008. *Controlling Violent Offenders Released to the Community: An Evaluation of the Boston Reentry Initiative*. Boston, MA: Harvard Kennedy School, Program of Criminal Justice Policy and Management, Rappaport Institute for Greater Boston.
- Chapman, Tim, and Michael Hough. 1998. "Evidence Based Practice: A Guide to Effective Practice." London: Home Office Publications Unit. [http://www.cjsw.ac.uk/cjsw/files/EVIDENCE\\_BASED\\_PRACTICE.PDF](http://www.cjsw.ac.uk/cjsw/files/EVIDENCE_BASED_PRACTICE.PDF).
- Conklin, Thomas, Thomas Lincoln, and Rachel Wilson. 2002. *A Public Health Manual for Correctional Health Care*. Ludlow, MA: Hampden County Sheriff's Department. <http://www.mphaweb.org/documents/PHModelforCorrectional-Health.pdf>.
- Corporation for Supportive Housing. 2008. *Getting Out with Nowhere to Go: The Case for Re-Entry Supportive Housing*. New York: Corporation for Supportive Housing. <http://documents.csh.org/documents/pubs/GetOutwNowheretoGo.Oct2008FINAL.pdf>.
- Council of State Governments, Justice Center. 2009. *Reentry Resource Guide*. New York: Council of State Governments. [http://www.reentrypolicy.org/resources/jc\\_resources](http://www.reentrypolicy.org/resources/jc_resources).
- Gilliard, Darrell K. 1999. *Prison and Jail Inmates at Midyear 1998*. NCJ 173414. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=877>.
- Gilligan, James, and Bandy Lee. 2005. "The Resolve to Stop the Violence Project: Reducing Violence in the Community through a Jail-Based Initiative." *Journal of Public Health* 27(2): 143–48.
- Glaze, Lauren E., and Laura Maruschak. 2008. *Parents in Prison and Their Minor Children*. NCJ 222984. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=823>.
- Harlow, Caroline Wolf. 2003. *Education and Correctional Populations*. NCJ 195670. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=814>.

- Hughes, Kristen. 2006. *Justice Expenditure and Employment in the United States, 2003*. NCJ 212260. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/jeeus03.pdf>.
- Hughes, Timothy A., Doris James Wilson, and Allen Beck. 2001. *Trends in State Parole, 1990–2000*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/tsp00.pdf>.
- James, Doris. 2004. *Profile of Jail Inmates, 2002*. NCJ 201932. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=1118>.
- James, Doris, and Lauren E. Glaze. 2006. *Mental Health Problems of Prison and Jail Inmates*. NCJ 213600. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=789>.
- Karberg, Jennifer, and Doris James. 2005. *Substance Dependence, Abuse, and Treatment of Jail Inmates, 2002*. NCJ 209588. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/sdatji02.pdf>.
- Lindahl, Nicole, and Debbie A. Mukamal. 2007. *Venturing Beyond the Gates: Facilitating Successful Reentry with Entrepreneurship*. New York: Prisoner Reentry Institute, John Jay College of Criminal Justice. <http://www.jjay.cuny.edu/centersinstitutes/pri/pdfs/VenturingBeyondtheGates.pdf>.
- Martin, Mark D., and Thomas A. Rosazza. 2004. *Resource Guide for Jail Administrators*. Washington, DC: National Institute of Justice.
- Maruschak, Laura. 2006. *Medical Problems of Jail Inmates*. NCJ 210696. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/mpji.pdf>.
- Minton, Todd D., and William J. Sabol. 2009. *Jail Inmates at Midyear 2008*. NCJ 225709. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=1004>.
- Piehl, Anne. 2009. *Preparing Prisoners for Employment: The Power of Small Rewards*. New York: Center for Civic Innovation at the Manhattan Institute.
- Reentry Policy Council. 2005. *Report of the Reentry Policy Council: Charting the Safe and Successful Return of Prisoners to the Community*. Washington, DC: Council of State Governments.
- Sabol, William, and Todd Minton. 2007. *Prison and Jail Inmates at Midyear 2006*. NCJ 217675. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/pjim06.pdf>.
- Sackett, David L., William M. C. Rosenberg, J. A. Muir Gray, R. Brian Haynes, and W. Scott Richardson. 1996. "Evidence-Based Medicine: What It Is and What It Isn't." *British Medical Journal* 312: 71–2.
- SAFECOM. 2004. *Writing Guide for a Memorandum of Understanding (MOU)*. Washington, DC: U.S. Department of Homeland Security. <http://www.safecomprogram.gov/NR/rdonlyres/70169F1E-F2E9-4835-BCC4-31F9B4685C8C/0/MOU.pdf>.
- Stephan, James J. 2001. *Census of Jails, 1999*. NCJ 186633. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/cj99.pdf>.
- . 2008. *Census of State and Federal Correctional Facilities, 2005*. NCJ 222182. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. <http://bjs.ojp.usdoj.gov/content/pub/pdf/csfcf05.pdf>.
- Travis, Jeremy, Amy L. Solomon, and Michelle Waul. 2001. *From Prison to Home: The Dimensions and Consequences of Prisoner Reentry*. Washington, DC: The Urban Institute.
- United Nations High Commissioner for Refugees. 2003. *Partnership: An Operations Management Handbook for UNHCR's Partners*. Geneva, Switzerland: United Nations High Commissioner for Refugees. <http://www.unhcr.org/4a39f7706.html>.

Upper Manhattan Reentry Task Force. 2008. *Starting Off on the Right Foot: A Needs Assessment of Reentry in Upper Manhattan*. New York: Harlem Community Justice Center. [http://www.courtinnovation.org/\\_uploads/documents/UMRTF\\_Needs\\_Assessment.pdf](http://www.courtinnovation.org/_uploads/documents/UMRTF_Needs_Assessment.pdf).

White, Michael, Jessica Saunders, Christopher Fisher, and Jeff Mellow. 2008. "Exploring Inmate Reentry in a Local Jail Setting: Implications for Outreach, Service Use, and Recidivism." *Crime and Delinquency*. Prepublished December 24, 2008. DOI: 10.1177/0011128708327033.



**URBAN  
INSTITUTE**

2100 M Street, NW  
Washington, DC 20037

Phone: 202.833.7200

Fax: 202.429.0687

<http://www.urban.org>